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Coordinated Program for Vocational Rehabilitation and Special Educational Services for the Mentally Retarded. Final Report.

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Secondary level special education classes and the Department of Vocational Rehabilitation (DVR) cooperated in a program of vocational preparation, job placement and followup. Of the 336 educable mentally retarded student referrals, 149 did not become clients because of inadequate potential (30%), satisfactory job placements (32%), student or parent refusal (22%), and miscellaneous other reasons (16%). Clients received instruction in work habits and attitudes, work experience both in and out of school, systematized work evaluations, wide diagnosis, and vocational counseling and placement. Of the 187 active clients, 52 remained open cases, 69 cases were closed as rehabilitated, and 66 cases were closed as not rehabilitated. Ten months later, 47 were on the same job or with the same employer, nine changed to more convenient jobs, five girls married and quit working, and eight were dismissed by their employers. Of the cases closed as rehabilitated, about 15% were sheltered workshop employable only. Implications discussed concern personnel and continuation, the rehabilitation process, medical and health concerns, special education programs, curriculum, and community support aspects. Also discussed are the development of a coordinated program, preparation for employment, work evaluation, tryout, and training, diagnosis, curriculum development, and techniques effective in working with the retarded. (MS)

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A COORDINATED PROGRAM
for
VOCATIONAL
REHABILITATION
SERVICES
for
THE MENTALLY RETARDED

"Project 1681"

FINAL REPORT

in cooperation with the
Vocational Rehabilitation Administration
Washington, D. C.
and
Portland Public Schools
Portland, Oregon

EC003 499E

U.S. DEPARTMENT OF HEALTH, EDUCATION & WELFARE
OFFICE OF EDUCATION

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Final Report

Coordinated Program for Vocational Rehabilitation and Special Education Services for the Mentally Retarded

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August, 1968

FOREWORD

It is with a feeling of satisfaction that I note the completion of this Project after some three years of effort and experiences on the part of the Portland School District's Special Education Department. The initial interest, which culminated in a written proposal in 1964 to the Department of Health, Education and Welfare, Vocational Rehabilitation Administration, was based upon a desire to discover the ways and means by which two public agencies at different governmental levels could be brought together in the cooperative endeavor of facilitating the transition from classroom to job training and employment of a certain group of disabled students. Improved services to high school age youth was the principal objective of this inquiry.

What worked? What didn't work? What are the implications for improved working relationships between the two agencies? The Project Report which follows, while neither definitive or inclusive, does seem to add hope for this type of agency cooperation and to provide further details for successfully providing a continuum of service to boys and girls with handicaps toward employment.

Melvin W. Barnes

Melvin W. Barnes
Superintendent of Schools

Significant Findings for the Rehabilitation Worker

Purpose and Methodology - The purpose of Project 1681 was to develop a coordinated program between special education and vocational rehabilitation to help the mildly mentally retarded student to become socially competent and economically self-sufficient. The schools wanted evaluation, rehabilitation, and placement for the students. Vocational rehabilitation wanted the students to receive better training for work while they were still in school and wanted contact with the student at an earlier age. Therefore Project 1681 offered the opportunity for early instruction in work habits and attitudes, in-school work experience, out-of-school work experience, systematized work evaluations, wider and better diagnostic techniques, and added vocational counseling and placement.

At the beginning of Project 1681 at least eleven questions or areas were to be considered. Data was collected through available records from several sources including the school and the special education cumulative files on the students. Special methods were used, and special forms were also made for the collection of specific data. Some of the designs included a statistical treatment; however, all questions, including the above, also included observation, description, and subjective information from people who had worked closely with the student.

Findings

336 - - - - - - - - - - - - Total number of referrals
187 - - - - - - - - - - Accepted by DVR and became active clients
135 - - - - - - - - Closed cases
69 (51.1%) - - Closed as rehabilitated
66 (48.9%) - - Closed as not rehabilitated
52 - - - - - - - - Open cases (under consideration)
149 - - - - - - - - - - Referrals and did not become clients of DVR
48 (32%) - - - - Secured jobs in keeping with ability before DVR acceptance
24 (16%) - - - - Misc. before DVR acceptance
4 - - - - - - - Drafted into military service
5 - - - - - - - Girls married
6 - - - - - - - Moved out of district or state
4 - - - - - - - Referred to other agencies (Goodwill, etc.)
3 - - - - - - - Institutionalized (Fairview-Dammasch)
2 - - - - - - - Girls pregnant
44 (30%) - - - - Not accepted because of inadequate potential as determined by DVR counselor (lack of social maturity, medical or psychological problems, lack of maturation, etc.)
33 (22%) - - - - Child or parent would not accept DVR project involvement for many reasons or excuses

Ten months after the sixty-nine student cases were closed as rehabilitated:

A. 47 (or 68%) were still on the same job or with the same employer.
B. 9 (or 13%) changed jobs--about the same kind of work--about the same pay but more convenient to employee. Two boys entered military service.
C. 5 (or 7%) girls married and quit working.
D. 8 (or 12%) were dismissed by the employer because of:
    3 because of poor work ability or lack of production.
    2 supervisor-employee conflict--not following instructions.
    2 poor attendance and lack of punctuality.
    1 bizarre behavior (institutional placement pending).

About 15% of the cases closed as rehabilitated were sheltered-workshop employable only.

34% of the sample (N = 100) of active clients had negative medical-physical findings that had not been found earlier by the school or by the family. 30% of the sample was recommended for further specialized medical examination.

A. 9 eye, ear, nose and throat
B. 8 dental
C. 6 skin problems including allergies
D. 4 urogenital disorders
E. 7 miscellaneous (1 each) scoliosis, heart, syphilis, lung, intestine, and nerves

Interpretations and Conclusions

A cooperative agreement program between Special Education and Rehabilitation Services to follow Demonstration Project 1681 will require a professional staff of at least five on the part of DVR. Two DVR counselors and a social worker made up the personnel for Project 1681. Of the 336 referrals, 187 became active clients. Some time was given to the 149 referrals that did not become active clients and to the 52 referrals still under consideration at "cut off time."

The activities of the social worker, or community representative, were diverse and many. The 160 families contacted, the 532 home visits, the numerous contacts with community agencies, and the direct services to the clients and their families were helpful in the rehabilitation process and an extension of DVR services. No definite conclusion has been reached as to the advisability of four DVR counselors and a social worker or five DVR counselors and no social worker especially assigned to the project.

Evidence from the findings is inconclusive as to how closely job placement follows or coincides with the information available on the students referred. Even if the information was rather complete no clear cut pattern emerged in the three year project.

Prevocational curriculum needs as shown by the follow-up indicated that a majority of the nonrehabilitated clients failed for the same reasons that prevented earlier success on in-school and out-of-school work experience, and a majority of them failed because of reasons other than the lack of specific work skills. This could be interpreted as a school need for more developmental and structured orientation toward the world of work.

A client medical examination secured by DVR discovered a medical or physical problem that had not been previously discovered by the school, or by the family, in about one-third of the students referred to the project. This raises the possibility of a need for a medical examination before a student is placed on an out-of-school job while he is still in school.

There is evidence showing the necessity of continuing an educable mentally retarded client on an inactive rehabilitation basis after Vocational Rehabilitation has been successful in placement. About one-third of the rehabilitated clients lost or changed jobs during the first ten months of employment. Future follow-ups will show whether this rate of change continues or not, but this in itself indicates a necessity of continuing a mentally retarded client on an inactive basis whereby help, great or small, is readily available to him as a client of DVR.

The young adult mentally retarded client requires a comparatively great amount of supervision. The nonrehabilitated client received even more supervision than the rehabilitated clients received. This is understandable and indicates that some of the more difficult cases will require even more different and perhaps extended methods and procedures of rehabilitation if we are to help more of the difficult clients able to become economically self-sufficient. Approximately 50% of client supervision was of a direct contact nature. A great deal of the coordinator's time was needed in employer training contacts.

The work of Vocational Rehabilitation can be evaluated by (1) the use of DVR's general criteria of evaluation, (2) the criteria of other similar programs, (3) the considered opinions of the personnel of Project 1681, (4) the opinions of the people making the referrals to the project--these people (teachers, school counselors, out-of-school work coordinators, etc.) remained in contact with many of the clients and received a great deal of valuable "feedback"--and, (5) consideration of the evaluations or opinions of the clients and their families.

The characteristics of the clients of Project 1681 were the same as the characteristics of the educable mentally retarded adolescents, or young adults, throughout the state and the nation as defined by the American Association on Mental Deficiency.

The Goodwill laboratory evaluation furnished some information about a client that could not be determined by the school. (1) It showed how a student functioned under longer periods of time under a sustained work schedule. (2) It showed that some students who had not been successful on in-school or out-of-school work experience could be successfully placed under "sheltered workshop" conditions. However, more information, study, and trials are needed in order to determine the best use of work-sample tasks. (3) About 15% of the rehabilitated were workshop employable only. It is quite evident that there is a definite and immediate need for more and better facilities for those students with low academic, social, and vocational potential.

Age is a determining factor in work assignments. Successful rehabilitation and employment closely paralleled the chronological age of the student or client. At age 17 almost none were successfully rehabilitated. At age 18 about 60% were rehabilitated, and at age 19 almost 90% of them were rehabilitated. The same held true in regard to out-of-school work experience while they were still in school attendance. Few 15 year olds were successful. About one-half of the 16 year olds were successful, and about 73% of the 18 and 19 year olds had been successful.

It is quite evident that school personnel and DVR personnel have cooperated wholeheartedly and effectively in carrying on Project 1681. It is also evident that the school and DVR, over a period of time, had developed procedures of working toward vocational proficiency which tended toward a "do it all yourself approach." This led to duplication of services and confusion in communication. There are indications that DVR, in general, has a tendency, real or implied, to judge progress by and concentrate upon "the movement of clients from one part of the rehabilitation plan to another." Perhaps some new guidelines will develop in a school-DVR cooperative plan to follow Project 1681.

Recommendations

The findings, interpretations and conclusions of this study lead to the following recommendations:

1. The Portland Public Schools and the Department of Vocational Rehabilitation should continue a joint school-vocational rehabilitation program.

2. DVR personnel should be housed with the special education personnel.

3. The combined personnel, at the beginning, should consist of four DVR counselors, a social worker, and four out-of-school work coordinators housed in the same office area with the Special Education Department.

4. The DVR counselor's case load should be about 30 to 35 clients.

The out-of-school work coordinator case load should not exceed 25 clients.

5. DVR should modify the "Rehabilitation Plan of client movement" from one part to another. Recognition should be given to services "in between" steps.

6. Further modification is needed so that clients can be carried on DVR rolls for an extended number of years after closure and remain eligible for any needed services. The joint project with the schools would provide a regular follow-up and evaluation of DVR clients.

7. The joint project must take the leadership in providing more and better facilities for those students and clients of low academic, social, and vocational potential.

8. A coordinating committee, as described in this report, is recommended as appropriate for a cooperative program between Special Education and DVR.

9. The school should continue to assess, evaluate, and revise the school curriculum for the mentally retarded in regard to the findings of Project 1681.

10. The school should revise the work experience program (both in-school and out-of-school) in keeping with the findings of the report in regard to vocational success and age of the student. This will require planning and cooperation between the special education teacher, the out-of-school work coordinator and the DVR counselor in providing a comprehensive work program for the high school student.

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COORDINATED PROGRAM FOR VOCATIONAL REHABILITATION AND SPECIAL EDUCATION SERVICES FOR THE MENTALLY RETARDED

PROJECT 1681

FINAL REPORT

In cooperation with the
Vocational Rehabilitation Administration
Washington, D.C.

August, 1968

PORTLAND SCHOOL DISTRICT
220 N. E. Beech Street
Portland, Oregon 97212

Part I - Introduction and Development of the Project

It is the purpose of this section to provide a general understanding of the setting in which this demonstration was made. By way of introduction, information is provided about the features of the Portland School District, the community, and the educable mentally retarded program. Development of the educable mentally retarded program includes several characteristics that led to this interagency demonstration. The history, philosophy, structure, and organizational constructs of an agency may place a heavy emphasis upon those features which could prove successful to a cooperative program. It is, therefore, important that this program and its setting be described.

Background Information

The Community served by the Portland School District is the largest in the state of Oregon. The school district, generally, encompasses the city of Portland with the population of approximately 387,000, and a public school population near 79,000.

The city is an inland seaport and has a diversity of economic activity. In fact, it might be said that a favorable, primary feature of the Portland employment structure is its diversity.

With regard to employment in the Portland Metropolitan area, it is estimated (Department of Employment, 1966) that nearly 25% of its workers are in semi-skilled or unskilled occupations. It is estimated that the projected need for new workers, in the next five years, is less than 20% in these categories. This would suggest semi-skilled and unskilled work in Portland may become more difficult to obtain.

Portland School District - The Portland School District (PSD) has a reputation for placing primary interest upon individual differences. Through the years several innovations have been made in keeping with this interest. Modular scheduling, work experience programs, distributive education program, prescriptive education, model schools, clinical secondary school, and many "special" projects are but a few examples of innovating processes geared to the individual.

While the individual is considered of paramount importance, the means by which the individual may be helped is given considerable support. Instructional centers, teaching media, and curriculum materials have played a continuing part in this development.

In keeping with the concept of individual differences, the Special Education Department has provided both leadership and services within the school district. This department is concerned with programs relating to the mentally retarded, physically handicapped, speech and hearing handicapped, visually handicapped, and extreme learning problems. Closely allied to these programs that may affect the handicapped are departments of Social Work, Attendance, Psychological Assessment, Health, Research, and those other services aimed at serving the individual. In all, some twenty-two thousand children annually receive guidance and/or special services required to serve the particular needs of these children.

The Program for Educable Retarded has been part of the total district development. It has grown to as many as thirty-seven certificated elementary teachers of the educable retarded and a high school program employing twenty-five certificated teachers. A strength of the Portland program for educable retarded has been the sequencing of its services for children of eight years of age through eighteen, or to high school graduation. With a stable corps of teachers, a notable supervisory staff, and a generally superior school system as its milieu this program has enjoyed steady curricular development but also the opportunity for experimental efforts aimed at new breakthroughs in curriculum revision and in modification of teaching techniques.

The high school program (Portland operates on a K-8-4 basis) is housed in eleven of thirteen neighborhood high schools, having a total of 31 "sections" and serving approximately four hundred and fifty students. As is true elsewhere in the United States, this type of program is relatively new, having been initiated in 1954 in three high schools on a trial basis. In September 1957 it became an approved program in the district and was gradually extended. Growth has occurred only as each additional high school has requested these services and has expressed a readiness to accept certain city-wide controls and other state-imposed standards.

The over-riding principle of special education is one of individualized attainment, and major objectives for the educable mentally retarded are similar to those for all children. Briefly stated, these objectives include attainment of those personal and social competencies, vocational aptitudes, and scholastic attainments necessary for independent living. The educable retarded should have the right to expect, and the opportunity to receive, an education commensurate with his capabilities for learning.

The School Program may be characterized by several assumptions generally made about the retarded. The educable retarded will probably have a short memory span, limited ability to generalize, difficulty in noting relationships, tenuous judgment, and little foresight. A program for this type of student presumes that such characteristics can be improved through a carefully planned sequence of educational experiences. This presumption rests on the belief that the level of functioning may be affected by environmental influences and can be improved by education. Further, the kind of educational procedures may determine the direction of development.

The development of suitable habits and attitudes for the world of work takes priority over the acquisition of specific vocational skills. Both areas are developed in the long-range curricular structure. In high school a gradually increasing time in the student's day is devoted to work experience. The work experience program has as an ultimate aim the economic self-sufficiency of the individual. This aim can be accomplished in part through training that will help the student (1) to seek a job in keeping with his abilities, (2) to obtain a job, and (3) to hold a job. Therefore the accent is placed upon occupational or vocational education, including special attention to Portland industries and available occupational areas.

Vocational training for the mentally retarded high school student includes a four-year work-experience program. The program first provides practical on-the-job training within the school for selected freshman and most sophomores. The student works on an in-school job and receives supplemental field trips to Portland industries. During the junior and senior years, students are assigned to out-of-school job training opportunities. Four school work experience counselors are assigned four-fifths day each to service this activity. The counselors work closely with the employer and with the special teacher finding suitable jobs, placing the student on the job, and evaluating his progress. The teacher of the special class begins this plan at the freshman level with curriculum experiences of the classroom, supplying information and guidance toward occupational opportunities within the school.

In-school Work Experiences - After the high school special class teacher has discovered the capabilities of the student, he will contact and discuss with the school "employer" possible in-school work-experience jobs for members of the class. The criteria to be used in placing and continuing a student on the job are decided by mutual agreement between the special class teacher and the "employer." The guidelines for in-school job placement are usually as follows: (1) the job placement should be of definite value to the student and to the school; (2) the special class teacher should arrange for job placements, counsel with students, make arrangements for frequent contacts with "employer," and agree upon a method of evaluating the student's progress; (3) the student shall remain on the job only if, and so long as, his work is satisfactory. He will be removed from the job if the "employer" and/or the special teacher finds him to be unsatisfactory; (4) the student will usually be assigned to a job for one period per day. He will receive credit toward graduation, and usually works without pay; (5) because many of the personnel ("employers") working with the students will not be teachers, (custodians, cafeteria managers, etc.), the special teacher must also become a job counselor in order to insure a successful outcome for both student-employee and for employer.

Out-of-school Work Experience is considered for juniors and seniors. Before a student is placed on an out-of-school work experience for part of the school day, he must have demonstrated his ability in the job world by holding a job in the high school for a period each day for a semester. For this, the student receives a grade and a unit toward graduation. He may have earned as many as three units during the time he was a freshman, sophomore, or junior. Following this, he is placed on an out-of-school work experience for part of the school day and may earn credit toward graduation. The number of credits earned depends upon the amount of time that is spent on the job, varying from one hour to one half day each school day during the semester.

This phase of the work experience program is supervised by a school work experience coordinator. The coordinator is basically concerned with the following activities:

(1) locates jobs in the community for pupils enrolled in the high school mentally retarded program;

(2) supervises and evaluates the pupils on-the-job after he has placed them;

(3) prepares the necessary reports on this activity;

(4) performs public relations duties in connection with the two responsibilities of teaching and job placement;

(5) works closely with the student's special class teacher during the time he is on an out-of-school work experience. They discuss and evaluate this student's strengths, weaknesses, and progress in the job so that additional needed school experience can be provided during the part of the day that the student is in school;

(6) makes contacts with student's family as necessary;

(7) confers with the project DVR counselor regarding referrals.

Statement of the Problem - For a decade the secondary schools in Portland have been providing increased holding power for retarded youth, but have not had the means to help them after four years of the special high school program, i.e. after graduation or upon leaving the school.

Another arm of the government's service has existed in the State of Oregon for more than two decades--the Department of Vocational Rehabilitation. Means were sought whereby this agency could assist in the additional training for employment which many retarded youth often need.

Historically, the school district special class program, including the work-experience program, has interpreted its role as being one of prevocational training. It was with this thought in mind that the district was prompted to seek a means of extending the services to handicapped youths near the termination point of the school program to provide a continuation of service for those high school special class students in need of further training.

In the spring of 1964, a proposal was written and an application was submitted to the Vocational Rehabilitation Administration of the U. S. Department of Health, Education, and Welfare. This application sought funds to develop a cooperative program which would meld the services of the school district and DVR.

The Vocational Rehabilitation Administration approved the application in October 1964, and the project became effective November 1, 1964, for a three year period. The project titled "Coordinated Program for Vocational Rehabilitation and Special Education Services for the Mentally Retarded," made some $50,000 per year available to the Portland Public Schools for the expansion of the existing services. These funds, in effect, provided two vocational rehabilitation counselors, a social worker, and a coordinator-evaluator to supplement the existing services available to the high school special class students.

In the development of this grant proposal, school personnel had developed a working relationship with the State Department of Vocational Rehabilitation and Goodwill Industries of Oregon. At the same time that the school district received this grant, the Vocational Rehabilitation Administration also acted favorably on a proposal submitted by Goodwill Industries. This grant permitted Goodwill to establish a rehabilitation unit at the Portland plant, including an evaluation shop, work adjustment training, and on-the-job training. Hopefully, then, the high school retarded program would refer some of its less promising upper class students to DVR and DVR would further refer some of these for special services and evaluations at Goodwill.

In Summary

This was a selected demonstration project organized to demonstrate results from a close-working relationship between the School District and Department of Vocational Rehabilitation and to improve and systematize the methods of work evaluation and follow-up. At the time of the Project 1681 proposal, the mentally handicapped person was held in a school program: (1) until graduation; or (2) until the legally required age of 18; or (3) until it was judged by school officials that he could no longer profit from the school instruction or was excused from compulsory attendance upon request of the parents or guardian. After leaving school if he desired DVR services he had to apply, be placed on a waiting list, pass through a screening process, and be accepted or rejected. This was a time-consuming procedure and one in which deserving, but uninformed individuals were frequently lost in the process. A liaison to provide continuity in services was needed because these distinctly handicapped people deserved the help of continuing services.

The proposed project included these considerations:

(1) "The special education section of the Portland Public Schools has been expanding its services to the mentally retarded for a number of years. It includes a total of sixty-two teachers in well-equipped classrooms for the education of the mentally retarded. A great deal of attention has been given to maximum development of academic skills and social adjustment. In any cooperative arrangement these concerns must remain the responsibility of the school.

"Concern has also been focused, through program and emphasis, upon making the individual employable when he reaches the point of school separation. The curriculum has been highly related to this objective. For many of the handicapped at the high school level, this is a remaining realistic goal. In-school work-experience has been related to class work and to out-of-school work experience. This sort of related curriculum has value for the total development of the child and should be maintained.

(2) "Some of the special functions carried on by the Department of Vocational Rehabilitation for their counselors, such as work evaluation, work supervision, and follow-up analysis are handled on a more comprehensive and individual basis than the school system has been able to accomplish. The Vocational Rehabilitation counselor should be a valuable asset to the joint venture in his knowledge of varied resources which can be used in the initial work evaluation. Closer supervision will make work experience more rewarding for the mentally retarded and less costly in time for the employer. The counselor will also be able to be in a better position to assess the value of the work experience and to estimate the future which faces the counselee.

(3) "Realistic pre-work evaluation of a large number of handicapped students is needed even after they have had an in-school work experience. Cooperation with Goodwill Industries, which is expanding its facilities concurrently to the School District's application, will make this sort of evaluation available in a pre-work evaluation laboratory, as well as providing work adjustment training and more sheltered and highly supervised out-of-school work experience for those who need it.

(4) "Recruitment, orientation, and delineation of duties of the staff for this project shall be through the regular district procedure. Since the State Teacher Tenure Law applies to certified personnel employed by the school district, it will be necessary to determine within the probationary period of these years any part of the project which will be discontinued.

Necessary adjustment of the personnel can then be made. The two vocational counselors should be chosen by the Oregon Vocational Rehabilitation office and according to the Vocational Rehabilitation standards, subject to approval of the Project Director.

(5) "One projected advantage of having the demonstration project with Vocational Rehabilitation counselors in the school system is to have the mentally handicapped students affiliated with the Department of Vocational Rehabilitation during their secondary schooling. If they are not conscious of these services at this age level, many of them will never realize the availability of this service and what it can do for them. Training and guidance in the relationship proposed will provide security to these individuals through knowing that job training, job finding, and supervision will always be available to them."

The project proposal, considering its nature, scope, and features, projected the following objectives which were to become a basis for Project 1681.

General Objectives:

(1) To increase the number of students among the mentally retarded being prepared for remunerative employment.

(2) To develop a coordinated program between special education and Vocational Rehabilitation.

(3) To systematize and expand the program of work evaluation, work try-out and work training.

(4) To improve diagnosis, placement, and curriculum development for mentally retarded children.

(5) To instruct both school teacher and Vocational Rehabilitation counselors in the special knowledge and techniques found effective in working with the mentally retarded.

Specific Objectives:

(1) A comprehensive evaluation of the employment expectations for mentally handicapped students both prior to and during work experience through:

a) Provisions of in-school work experiences and supervision.
b) Collection and analysis of data in a structured task situation provided by Goodwill Industries.

(2) Systematic supervision and follow-up of the out-of-school work experience.

(3) An initiation of improved in-service procedures for developing curriculum and up-grading teaching techniques.

Review of Relevant Literature

School-DVR cooperative programs are relatively new. Most such programs have apparently developed from original findings of the President's Panel (1962), and have subsequently been organized through federal programs of one type or another. A literature review should include a digest of these programs, but this is not particularly feasible nor available at present. There are however other sources from which selective information may be obtained.

Under the broad term "occupational education" one will find many subtitles that could give relevant information for this study. Vocational education, rehabilitation, work skills, work studies, and employment knowledge are "titles" from which data can be gathered. A general definition of occupational education may be that which deals with common elements in obtaining, maintaining, and advancing in a job (Douglas, 1944).

With regard to the general nature of "occupational" review of the retarded, four authors (Goldstein, 1959, 1964; Kolstoe, 1960, 1961; Windle, 1962; and DiMichael, 1952) plus several individual studies (Larson, 1962; Fry, 1956; Dinger, 1958; Shafter, 1957; Mullen, 1952; and Cowan and Goldman, 1959) give information concerning several features of occupational adjustment for the retarded. From these reviews a certain amount of agreement seems to emerge:

(1) The retarded seem to find most of their employment in unskilled categories. This type of employment varies with no one job such as a janitor being particularly dominant. There appears to be a growing number of Educable Mentally Retarded finding employment in what is termed "service" areas. Semi-skilled work is the category in which the second largest group of EMR's find employment.

(2) Family support and relations seem to be an important factor in furthering success. This would suggest a counseling program for the EMR that is a bit more active than what would be considered "normal" in regular programs. Some chance for responsibility within the family and in the school setting appears to be a stimulating factor to those EMR's who are successful in employment.

(3) Personal appearance and good health practices are mentioned in several studies either as dominant factors or underlying ones. This is a common-sense indicator in our society. Other things being equal, an employer is going to choose an employee who has adequate appearance and practices good health habits.

(4) Intelligence is not an overriding factor in unskilled or semi-skilled work. Reliability and honest effort seem to be far more important.

(5) The occupational picture in unskilled and semi-skilled work is changing. Automation creates some jobs but apparently replaces more workers at these levels.

(6) Personal and social skills are factors of paramount importance. The ability to handle criticism, ability to adjust, accept established practices, and interact with people in an acceptable manner are especially important.

(7) "Work skills," as a very broad heading, are crucial to the EMR in many respects. This heading appears to be thought of as a "catchall" for several factors. Coordination activities including dexterity, assembly, sorting, and perception are contributors to employment success. Knowledge, including "laws," and procedures is a related area of concern.

(8) A survey of the community with regard to the EMR population is important in that it gives information that is usable for training. A knowledge of what people are doing, job holdings, trends, social climates, and economic structures can give valuable information for those concerned with education and training of the EMR.

The above information tends to separate into two broad categories. One has to do with the social and personal aspects, while the second seems to involve the "skills" and psycho-motor areas of work. The latter category is not as well defined as the first; however, research points to the latter as a generally significant area. Both have implications for school occupational programs.

Several dual-agency programs have been reported and may reflect features that could be pertinent to this cooperative agreement. It must be remembered, however, that a particular environment may provide situational factors that could be workable in one area but not in another.

The Minneapolis Project 681 (1965) findings indicate, in a similar school-DVR project, the following:

(1) A need for a multi-dimensioned diagnosis--one that cuts across many behavioral sciences.

(2) There appeared to be little difficulty in the job finding areas except in sheltered workshops.

(3) For students placed on jobs, it was necessary to supervise such placement for a long period of time.

(4) The subjects, generally, were not ready for permanent employment until completion of high school.

(5) School Special Education programs have to expand to meet the various needs of their students, and curricula must adjust to maximize the retardate's functioning levels.

(6) Agencies must take a broad and flexible view of their client's needs.

The Minneapolis community is one that has been established, with respect to special education, for some time. It is similar to Portland in that it, too, is metropolitan in nature and has, apparently, experienced a large growth pattern followed by a leveling off or even declining enrollment. The two districts have obviously been interested in "work" programs.

The Eugene, Oregon Project (1966), conversely, was operated in a situation where "work" programs were not developed and in a smaller population environment. As might be expected, some of this project's findings are different from those of Minneapolis. In essence, the Eugene Project reports:

(1) The project established a change in the school curriculum with emphasis on work experience.

(2) The professional staff in such programs (School-DVR) must be team oriented and highly flexible.

(3) The work experience program as a teaching instrument was a departure from traditional (in Eugene) teaching methods.

(4) The retarded students of this sample had good work potential, and training placements and diagnosis were important parameters of such potential.

(5) Small caseloads were essential.

(6) It is most productive to offer DVR services while the students are young and formative.

It may be significant to note that a different emphasis, in recommendations, is stressed in these two similar projects, but with different environments in respect to development and size. One stresses job development, supervision, and multi-expansion of programs, whereas the other appears to stress curriculum change and basic development of a "work" orientation. Both, however, agree to a team approach and the need for a good evaluation procedure.

Implications expressed by Ritter (1967), Donaldson (1966), Springfield Goodwill Industries (1967), and Barris (1967) indicate successful dual-agency programs may operate in such a manner that immediate outcomes for the retarded are beneficial. Each reports a gain in numbers rehabilitated because of programs working directly with the retarded through DVR. Such programs tend to hold students longer, be more effective in employment, and the functioning levels tend to increase.

With a background of dual-agency success in work programs for the retarded, it remains for each cooperative project to develop in its particular environment. The present project sought to develop a cooperative program based upon information and strengths of each agency. What follows, then, is a report of this effort.

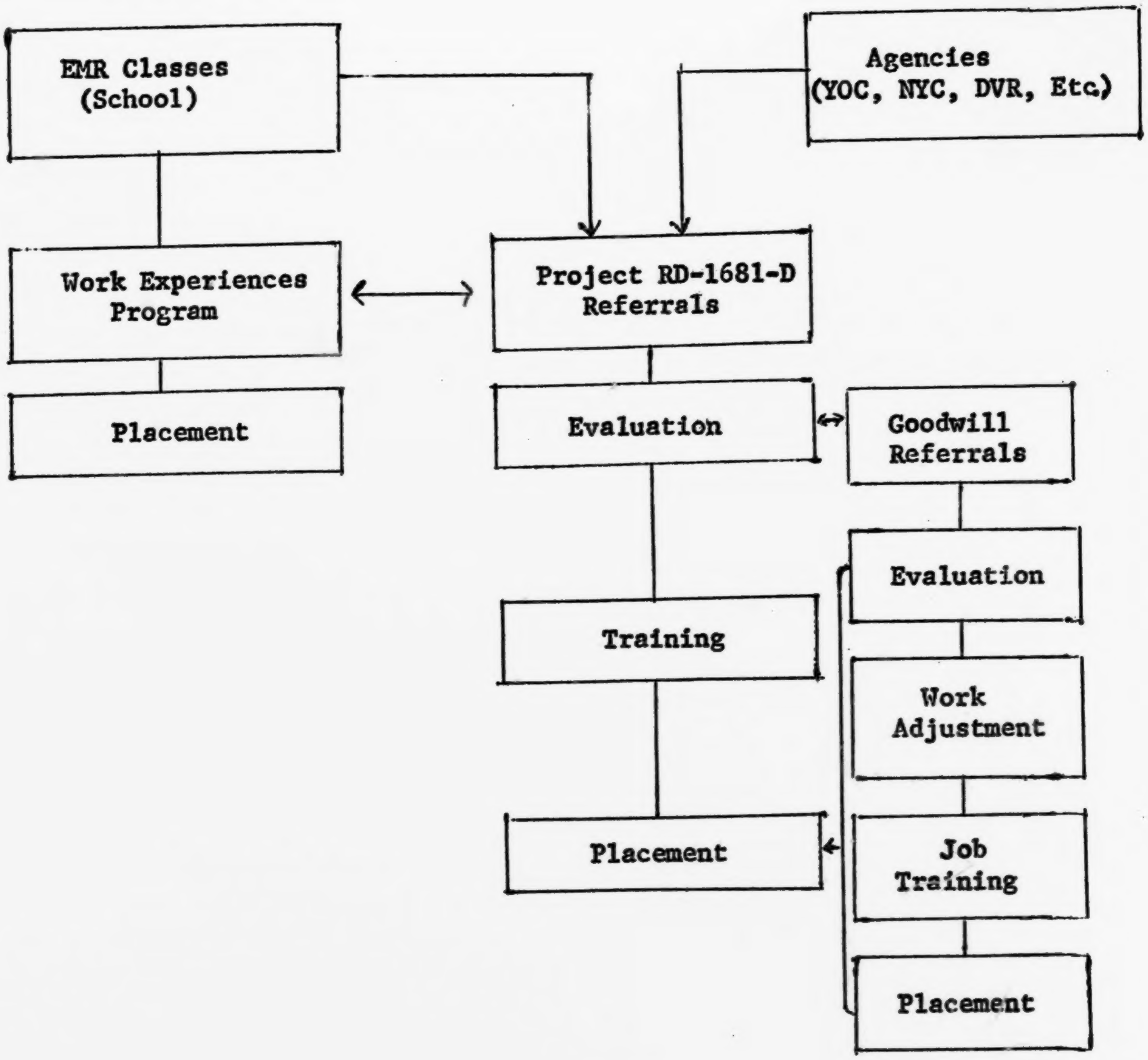
Part II - Methodology

Part II will explain the processes involved in the study. The total population sample consisted of three basic groups: (1) those students in the out-of-school work experience program who progressed at a reasonable rate toward their vocational potential and could be placed without too much concern and without additional training. (2) those students who became clients of Project 1681 and the prognosis was that they would be in need of further training and perhaps other kinds of help through the services of DVR. (3) those students, and clients of Project 1681, with additional and special needs who were referred to, and serviced by, the Goodwill Industries of Portland. It is necessary to define and describe each student area. Each group required an analysis for this project and helped to give weight to the final recommendations.

In keeping with the objectives of Project 1681, a series of eleven questions evolved that could lead to information pertinent to final recommendations. Much information was collected through school and special education records. Information such as intelligence and achievement estimates, progress in school, developmental histories, and school relations were readily obtainable and available to the project office.

In the pages that follow, descriptions are provided in order to give a basis upon which the information was collected. The project organization is shown in the following diagram.

Figure One - Organizational Chart of Project 1681-RD


EMR Classes
(School)
Agencies
(YOC, NYC, DVR, Etc.)
Work Experiences Program
Project RD-1681-D Referrals
Placement
Evaluation
Goodwill Referrals
Evaluation
Training
Work Adjustment
Placement
Job Training
Placement

The above diagram suggests several levels that may be considered as a part of Project 1681. These levels may be envisioned as follows:

Referral Level - Referrals came mainly from classroom teachers through the school work coordinator. Some EMR students who dropped out of school were automatically referred to the Project by school authorities. Also, during the course of the demonstration, follow-up studies were made of post-graduates, and some referrals were made by non-school agencies who needed assistance in making vocational plans for retarded youth.

Evaluation Level - Referrals were evaluated from several sources of information. These included school records, medical reports, tests, social summaries, counseling techniques, and case histories. Some selective clients, who were in need of further evaluation, were referred to Goodwill Industries for a more intensified work evaluation that included testing and job samplings. Resultant client interests, staffings, and evaluative information gave "direction" to plans for the clients.

Development Level - After the evaluative processes, clients could be expected to need further training, or possibly, training in selective areas. The program could include many training areas at Goodwill or other facilities in the community. Some clients who did not need further training were programmed to work tryouts, or arrangements were made for work experience. This part of the program was considered developmental.

Directional Level - Clients placed on work situations were supervised and guided for the period of time necessary to insure a "job fit." This level required counseling, coordinating, and supervisory activities by the project staff. The clients developed their vocational potential in the community until such time as it was estimated they could be self-sufficient.

Operational Level - This level was one at which the client became a part of the community and continued to grow vocationally. Hopefully, he operated in such a way that he continued to be a successful citizen.

Project 1681 operated as an adjunct to the school district's ongoing program and an arm of DVR.

During the tenure of the project, usual procedures had to be modified. From the onset of the program, orientations were given to the special education teachers and staff personnel. These consisted of program explanations, operational procedures, and tours of facilities including Goodwill. Emphasis was placed upon procedures and philosophy of this project. As new special education teachers came into the district, they were given an orientation to the work program and, specifically, to Project 1681.

The work-experience phase of the total program included four out-of-school coordinators, aside from the school special education teachers. The out-of-school work coordinators made preliminary evaluations with teachers and other school personnel on matters concerning possible training or work stations.

The school work coordinator-teacher evaluation consisted of information from placement and supervision during in-school and out-of-school work experience. It was determined, usually during the senior year, whether the student would need more training, a particular kind of training, or more vocational help than the school could achieve. Those students needing special help referred to Project 1681 by means of a form shown in Appendix A.

Referrals were made to the *Project Coordinator* who coordinated the program and was responsible to the Project Director for coordinating and carrying out both the research and service aspects, and the general administrative duties including the budget. Potential clients were then assigned to one of two *DVR counselors* who evaluated, arranged for more information, counselled, helped place clients on a job or a training program, supervised and estimated progress, and conducted a general job orientation with clients in the project. These counselors were also responsible to the Department of Vocational Rehabilitation for case service funds, records, and budget.

The DVR counselors were assisted by a *Field Representative* who did social work with selected clients and their families. This person had the responsibility of translating, evaluating, and communicating information relevant to the client's social pattern as it affected his work schedule.

It became evident as the projects progressed that much communication and many arrangements had to be made among the personnel. The fact that the work coordinators, DVR counselors, and the field representative were housed in the same offices helped immeasurably to keep lines of communication open on a day-to-day basis.

Population and Sample

This demonstration concerns itself with the school population of special education classes of Portland School District No. 1, Portland, Oregon. These classes contain certified educable mentally retarded students.

Certification is carried out by a set of standards as prescribed by the Department of Education (1956). These standards include the following:

1 - A medical examination
2 - an individual psychological examination and report
3 - an educational summary
4 - a social summary
5 - a developmental history
6 - a review by the State Department of Education.

When a student is referred as a possible candidate for the mentally retarded school program, staffings are held in order to determine his eligibility for special achievement placement.

A typical certified student in this study might be pictured as one who has taken a psychomtric examination and received a total rating of 50-75 on the Wechsler Intelligence Scale for Children; who has had a physical examination with corrected defects such as vision or hearing ruled out as major contributing factors; who has a school achievement record of an obviously low level; and who appears as one who will not be able to profit from the regular school program. These students spend about one half of the school day with certified special education teachers. During the remainder of the day the student attends regular non-academic classes in art, music, shop, physical education, homemaking, etc. This is a policy of the district.

Project 1681 clients were those referred specifically to it and accepted for vocational rehabilitation. There were one hundred and eighty-seven educable mentally retarded students who became project clients.

This report concerns itself mainly with Project 1681 clients. The clients are the basic subjects for description and research of this demonstration. Where the total number could not be used in the collection of data, a short description is made, in each collection, of that sample.

Research Areas

In keeping with the objectives presented in Part I, the project administrators met for the purposes of describing the particular concerns which would be needed to give meaning to the objectives. Prior meetings and discussions were held with staff personnel and teachers of the school district in order to determine the areas which might prove beneficial to the overall program. A meeting was also held with members of the research department of the Portland School District.

This meeting brought forth several specific concerns that could lead to information pertinent to what the final recommendations would be. The following questions formed a basis for data gathering:

(1) What and how many personnel are needed for the Portland Program for the mentally retarded (approximately 100 seniors) as determined by demonstration Project 1681?

(2) What were the contributions of a social worker to Vocational Rehabilitation project?

(3) Does a job placement follow (or coincide) with the information available on a student?

(4) What does the follow-up on job placement show as to curriculum pre-vocational needs?

(5) To what extent is the present medical information obtained and needed by the school proving to be necessary and adequate to the vocational rehabilitation client? Is the same kind of medical information indicated for all other graduating seniors in the program for the mentally retarded?

(6) Is there evidence showing the necessity of continuing a client on an inactive rehabilitation basis after vocational

rehabilitation has been successful in placement?

(7) How much client supervision was provided by the vocational rehabilitation counselor?

(8) How can the work of vocational rehabilitation be evaluated considering this project sample and dual agency operation?

(9) What were the characteristics of the client samples?

(10) What does the Goodwill laboratory evaluation tell us about a client that cannot be determined by the school?

(11) To what extent is the chronological age of a student a determining factor in work assignments?

The above questions could not give all the information needed. These questions, however, were supplemented by other reports and studies, each described in section three.

Collection and Analysis of Data

The collection and analysis of data is best described under each question. Several kinds of collection and statistical treatment were used. Much of the information was collected through records kept in the Project offices. The Project files included information taken from school records kept in the office of Special Education. Information such as intelligence and achievement estimates, progress in school, developmental histories, and school relations were readily obtainable.

Working files were kept on each client that included the following:

(1) application
(2) approvals
(3) case record
(4) referral
(5) medical
(6) written records of evaluation, diagnosis, plans, and eligibility statements
(7) Goodwill records (if placed)

Some questionnaires, rating forms, and special studies were made to obtain specific information. The latter are described in the results section. All reports and statistical treatments were reviewed by the school district research department.

In the following section each question was considered separately and described with the appropriate information. Not all concerns could be given a statistical treatment; however, observation and description might be substituted and in many instances were more appropriate.

Part III - Results

Part III presents the results of the data of Project 1681. The data, the discussion, and the implication of the results of this study are based upon the questions listed in Part II. The results will be discussed further in Part III.

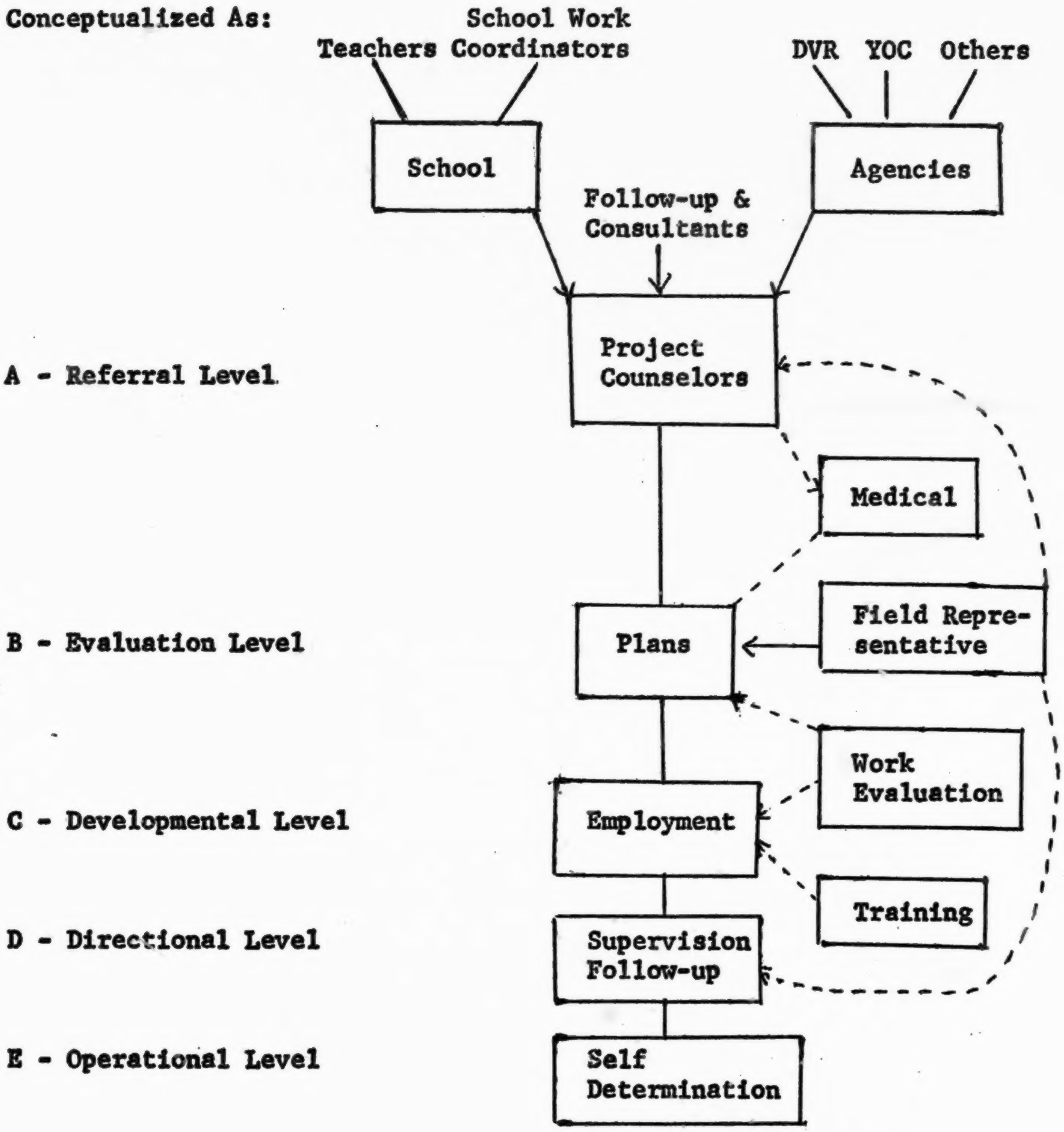
(1) What and how many personnel are needed for the Portland Program for the mentally retarded (approximately 100 seniors) as determined by demonstration Project 1681?

The concept of having a DVR counselor was new to this school district. DVR-school relationships were somewhat distant before the operation of the Project. This was to be expected. The school has traditionally been interested in education and methods by which students might achieve certain things. Training, for instance, has been part of the retarded program and has led to work experiences of various sorts. This, however, has been part of a total education program and has only indirectly led to employment.

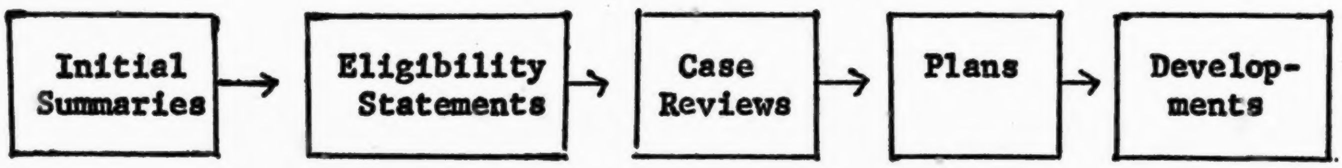
DVR, on the other hand, has been concerned with specifics that lead to full and appropriate employment. This agency has been "in the business" of counseling and training handicapped workers for some time and has developed a more-or-less sophisticated approach to the procedure. This procedure, called the "rehabilitation plan," was new to the school and could afford modifications for the total work experience phase of the school retarded program.

The procedure used in this Project may be diagrammed as follows:

Figure Two: Procedural Chart of Project 1681


Conceptualized As:
Teachers
School Work Coordinators
DVR
YOC
Others
School
Agencies
Follow-up & Consultants
Project Counselors
A - Referral Level
Medical
Plans
B - Evaluation Level
Field Representative
Work Evaluation
Employment
C - Developmental Level
Training
Supervision Follow-up
D - Directional Level
Self Determination
E - Operational Level

The DVR counselor had the responsibility of organizing the available information from several sources and made arrangements to obtain other information, such as medical. This information was then put in written form as:


Initial Summaries
Eligibility Statements
Case Reviews
Plans
Developments

The Referral Level was intake process primarily. It is here that initial referrals became known to the project. Most of the school referrals came indirectly from the teacher and in consultation with the out-of-school work coordinator. Preliminary information was provided as to the reason for the referral. The same form was used for all referrals. (Appendix A)

The initial referral was reviewed by the Project coordinator and then given to the DVR counselor for interview. Many times, depending on the nature of the referral, the resources of the staff field representative were used.

The DVR counselor had information from the referral sheet, Child Services' records, and the field representative. Additional information was made by counseling with the teacher, school work coordinators, and the prospective client and family. A medical examination was arranged and further reviewed by a consulting physician. Pertinent activities for the DVR counselor at this level were:

(1) Reviewing school records, reports, forms, referral form, field representative report, and Child Services student file.

(2) Review student school work experience record and medical examination records.

(3) Counseling with the out-of-school work coordinator, school counselors, teacher, and student.

(4) Writing summaries.

The Evaluation Level is an area by which plans are made for the client based upon information available. At this point arrangements were made with the Youth Opportunity Commission, a subsidiary of the United States Employment Service, to take the General Aptitude Test (GATB). This information was viewed as supportive to a possible general direction and was dependent upon the evaluations and interests of the client.

As one would expect, there was a considerable degree of overlap from one level to the other. This was particularly true of the first two levels. Generally, however, the evaluation level was one where plans were made and initiated. The plan could go directly into employment as was the case with approximately 50% of the project clients. Half gave indications that something more was needed. Goodwill Industries, in many instances, made an extensive work evaluation on many of these selected referrals. Based upon an accumulation of information, further training could become necessary toward the employment goal, and appropriate plans were made to further this goal. Activities of the DVR counselor at this level included:

(1) making arrangements for testing
(2) making arrangements for evaluation

(3) writing eligibility statements
(4) staffings on evaluations
(5) staffing on Project level
(6) counseling with clients
(7) writing case review
(8) personal arrangements with clients and/or school and family
(9) writing plans
(10) training arrangements with Goodwill
(11) counseling and supervision of training aspects
(12) communication with people concerned

The Developmental level can be visualized as an occupational tryout step. It is here that the client applies the training and counsel that has been given him. The Developmental level is the beginning of the culmination of the plans made for this individual. DVR counselor activities centered around the following:

(1) employer negotiations
(2) client counseling
(3) writing continuum of plans
(4) on the job supervision
(5) job finding activities
(6) program implementations
(7) communication

The next levels are continuations. The Directional Level is an employment program over a period of time. DVR counselor's activities are similar to those found in previous levels. The emphasis, however, is placed on graduated degree of self sufficiency. After a given period of time and the reaction of variables acting upon the client, it may be determined whether a stage of sufficiency has been reached.

The final level may be directed as a stage of self determination where the client can function in a competitive situation. When this point is reached the client is put in "closed" status. This status, however, can be reopened, and the DVR counselor's activities are a continuance of those mentioned above. A list of DVR counselor activities, such as in the preceding, does not, however, disclose all possibilities of his participation. In fact, he may participate in many more activities which may go unnoticed and unreported. The DVR counselor also spends time in: travel, communication and writing, scheduling, dictating, conferences and meetings, reading, and DVR and community relations.

In an attempt to estimate time involved in the general working through a case, a record was kept of three separate months for each counselor's activities. This record would then purport to give some clues indicating the direction of effort with the sample population at the particular time recordings were kept.

Table I - Time Percentage of Project Counselors' Caseloads

		% of time devoted
Referral Level		19
	%	
organizational materials	6	
counseling	25	
writing	29	
communications	31	
travel	9	
Evaluation Level		21
arranging	11	
communication	16	
staffing	21	
counseling	30	
writing	13	
travel	9	
Program Level (Training)		24
counseling	33	
employer conferences	18	
supervision	1	
staffing	10	
writing	10	
travel	8	
communications	20	
Directional Level (Employment Tryout)		15
counseling	9	
employer negotiations	12	
supervision	4	
writing	20	
job finding	25	
travel	12	
communications	18	
Self Determination Level (Full Employment)		11
counseling	16	
employer negotiations	20	
supervision	8	
writing	10	
travel	14	
communications	32	

	%	% of time devoted
Other		10
administration	38	
in-service	8	
professional meetings	42	
research	3	
travel	9	

Table I indicates that Referral, Evaluation, and Developmental levels receive the major percentage of time. This is quite understandable since these sections include the greatest amount of clients in this rehabilitation process.

It is important to note that the levels, Referral, Evaluative, Program require the greatest amount of counseling and communication. These factors appear pertinent to the rehabilitation process and bring attention to many features in developing plans for the EMR individual. It is important that the same plans and organization remain flexible for this educable retarded sample. From Table I lesser amounts of time are indicated in supervision and job finding activities.

Another consideration pertinent to the amount of personnel needed is an indication of the numbers of potential clients. Table II indicates the graduation numbers from 1959, and an estimate of numbers from 1968 through 1979.

Table II - Number of EMR Special Education Students Graduating from the Portland High Schools

Year	N.	Year	N.	Year	N.
1959	24	1966	82	1973	95*
1960	37	1967	92	1974	96*
1961	50	1968	82*	1975	94*
1962	66	1969	90*	1976	91*
1963	79	1970	111*	1977	95*
1964	96	1971	107*	1978	96*
1965	90	1972	98*	1979	99*

* Estimated from present enrollment figures.

Table II indicates a growth of numbers in graduating EMR students and suggests that a larger number will be in need of rehabilitation services. It is suggested that the increased numbers should reflect an increase in the need for services from the vocational project.

The school referral system is a variable influencing the number of clients in the rehabilitation project. Table III indicates the number of clients graduating from high school.

Table III - DVR Project Clients
Listed According to Year of Graduation

'64 & Before	'65	'66	'67	'68	'69	'70
N = 9	34	42	49	38	13	2
% of class	38%	51%	53%	46%	14%	2%

N = 187 (first 187 clients as of 3-10-68)

Counting all sources of referral, Table III suggests that approximately 50% to possible 60% of a Portland School District graduating special education class will eventually be clients of the rehabilitation project. The significant percentages are those of 1966, 1967, 1968, and 1969 graduating classes as these years reflect the greater amount of Project 1681 activity. 1965 was the initial year of the Project and it is thought this figure is indicative of the amount of personnel and problems in the initial grant year. Table III suggests an increase, percentage-wise, of clients from each school class. It is important to note that thirteen (14%) of the present Junior class are clients. This indicates a possible need for earlier referral in the future, and an increase in total referral numbers.

The majority of referrals came from the teachers-school coordinators as indicated in Table IV, and of course was a policy of the project. Of the client total, nearly 80% came from this source. Another 15% was found by this project's "follow-up" inquiries of past graduates (October, five months after June graduation date) and those who come to the coordinators' attention from the list of excused students.

Table IV - Referral Sources for Project 1681

			N	%
School			179	96%
teacher-school coordinator	152	(85%)		
project follow-up	12	(7%)		
School Child Service Office	15	(8%)		
Youth Opportunity Commission			5	2.6%
Regular DVR Program			3	1.4%
Totals			187	100%

(based on first 187 clients as of 3-10-68)

Approximately 4% of the referrals came from sources other than school-DVR project services. Table IV indicates the vocational project is strongly dependent upon teacher-school coordinator referrals.

Based upon 109 closed cases as of January 16, 1968, Table V indicates the amount of time needed from initial referral status to a closed status.

Table V - Length of Time for 109 Closed Client Cases of Project 1681 From Initial Referral Status to Closure Status

	N	Average length of Time
Regular caseload	59	11 mo. 22.2 days
Referred to Goodwill	50	1 yr. 6 mo. 21 days
Totals	109	1 yr. 2 mo. 28 days

range = 20 days to 2 years, 8 months, 27 days

Approximately one half of the referral clients were, during the rehabilitation process, referred to Goodwill Industries for evaluation or training. This category will be reported later (see Question Ten) and is used here to show differences in time length only. The important figure from Table V is the indicated total of one year, two months, twenty-eight days mean from initial to closure status.

Data from Table V indicates the "long term" nature of some clients.

Also, it should be noted the mean length of time suggests several clients from different graduating classes will be in the rehabilitation process during the same period and would increase the potential caseload.

Another factor that may bear upon personnel needs for this project's continuing requirements is the "type" of referrals made. If many of the referrals who become clients are in need of intensive and longer attention to develop their work potential, the rehabilitation process might require a considerable length of time. Such a client would usually require more comprehensive evaluations, longer training periods and adjustment, and greater supervision of placements to bring about a successful employment potential to a logical conclusion.

In an attempt to make an evaluation of the possible "type" factor, judgment ratings were asked of teachers and school work coordinators of senior students. The rating scale was made before referrals to Project 1681, and had the advantage of two separate estimates for each student. The instrument is described in Appendix B and a single rating rcc = .74 and an average rcc = .90 was found (Guilford, 1965, pp. 297-300). Essentially each student was rated as:

A - A good or high prognosis toward vocational rehabilitation.

B - A fair prognosis toward vocational rehabilitation.

C - A poor or difficult prognosis toward vocational rehabilitation.

Data was obtained on 62 referrals who became Project 1681 clients and were rated by the student's teacher and school work coordinator. Additional information can be shown, separately, for 188 students seen by school coordinators and 100 students seen by teachers in a three year span.

Table VI - Ratings of EMR Students by Teachers and School Work Coordinator on Vocational Prognosis

Dual ratings	A	B	C	Totals
Male	9	13	9	31
Female	7	15	9	31
Totals	16 (26%)	28 (45%)	18 (29%)	62

Separate ratings	A N	B N	C N	Totals N	% of T.
School Coordinator	44	65	24	133 (188)	70.7%
Teachers	19	32	18	69 (100)	69%

The differences in numbers of separate ratings from one group to the other is accounted for by teacher transfer from one school to another or changes in grade assignments. Table VI data is limited in this respect. However, it does demonstrate possible trends in the "type" factor information.

Table VI implies, as judged by dual ratings, that a balance exists in "type" referrals that become clients. Table VI further suggests, however, that if the vocational prognosis appears difficult the student will probably be referred to Project 1681 approximately 90% of the time. This feature was expected and is in keeping with one of the objectives of Project 1681, but some account should be made with regard to "difficulty" and caseload since close to 30% of the clients hint at "long term" rehabilitation.

The recommendation by DVR (Handbook for Counselors and Supervisors, 1967, p. 14-15) indicates a caseload of 36 mentally retarded clients to be maximum load. The figure, however, is considered arbitrary and based "on the maximum number of students the State Department of Education will permit in two special education classes of 18 each."

Summary

Data from Tables One through Six and information gathered for Question One, direct attention to the following factors:

(1) The activities of the DVR counselor are diverse and numerous.

(2) The DVR "plans" are geared to the individual.

(3) The individual client represents no simple single system

for rehabilitation.

(4) 64% of the DVR counselor's activities are spent in Referral, Evaluation, and Developmental levels in the rehabilitation process.

(5) Much of the rehabilitation process in Project 1681 centers primarily in counseling and communications activities, with writing and employer relations in close supporting roles.

(6) Table I indicates comparatively less amount of time is spent in supervision and job-finding activities.

(7) Enrollment figures estimate a slight increase of graduating EMR students in the next four years in the Portland School District.

(8) It appears that approximately 50% to 60% of Portland School District EMR students will become clients of the vocational project.

(9) 96% of the referrals to the vocational project will come from the school district, and of this percentage, 80% of the total will most likely come from teacher-school coordinator referrals.

(10) The average length of time for clients from initial status to closed status is 1 year, 2 months, and 28 days based upon an N = 109 of closed cases.

(11) The average length of time indicates clients from one graduating class will overlap with another.

(12) Some 90% to 95% of the EMR students judged having a "poor" vocational prognosis will become vocational project clients. This figure represents approximately 26% of the total client load.

(13) Some 45% to 60% of the EMR students judged having a "good" vocational prognosis will become vocational project clients. This figure represents approximately 23% of the total client load.

(14) One estimate (DVR, 1966) suggests a maximum caseload of 36 clients.

(2) What were the contributions of a social worker to the Vocational Rehabilitation Project?

Figure Two, under the discussion of Question #1, noted that a field representative (social worker) had a relationship with several areas of Project 1681. It became evident soon after the initial months of the project, that some additional help was needed in working with social problems of the clients, and their families.

The efforts of the field representative were directed toward serving families. An effort was always made to see both parents when a contact was made. This resulted in a good deal of work being done in the evenings and on weekends. The majority of contacts were made with both parents.

The data in Table Seven represents a review of written records and specific observation over two representative periods of time. The information was accumulated from November 1, 1965 to August 1, 1967, and October 10, 1967 to January 15, 1968.

Table VII - Field Representative Home Contacts

Families Contacted = 160 (includes all referrals)

Home Visits = 532

Mean contacts per family = 3.34

Information obtained by the field representative became a supplement in expansion of what the DVR counselor has in the working file of each client and permitted decisions to be made with the maximum information available.

Data gathered was social information regarding family background, medical, social, and economic status, as well as the parent aspirations and plans for the child.

It was the project's policy that the social history become a part of the client's file at the time service was initiated. For those individuals going to Goodwill for evaluation the practice has been initiated whereby the parent and pupil visit the plant prior to the starting date.

The use of community resources and agencies in advising and helping families was another major activity of this person's time. Contacts and referrals have been made as follows:

Table VIII - Community Resources Used by the Field Representative

	Contacts		Contacts
Goodwill Industries	43	C-Cap	5
Welfare Department	21	Red Cross	4
Juvenile Court	17	O.E.O. Community Center	2
U. S. Employment Service (YOC)	12	Kaiser Hospital	2
Housing Agencies	7	Family Planning Assoc. of Ore.	1
U. of Oregon Medical School	5	Reed College Tutoring Program	1
Public Health Office	5	Legal Aide Society	1

If there has been any pattern of or common element in the Field Representative's efforts, it has been that excellent cooperation on the part of most parents has resulted when they have been involved in planning from the time of initial referral.

Pertinent activities of the field representative at Project levels were to review all available records on the client, to interview teachers, family, and the potential client.

From these sources and personal contacts a social summary was written which became part of the referral write-up. This was used with other pertinent information and became part of the evaluative plans for a client.

Depending upon the direction of the client, the field representative became involved as part of the on-going activities of the client and the program designed for him. These may include the following:

(1) On-going counseling work with the family
(2) Specially needed preparations for the client
(3) Special subtle factors that may enhance the person's progress For instance: Busroutes, use of money, ways of doing things, etc.
(4) Support of work and social influence that may affect job or training situations
(5) Activities that would relate to communications within the Project, both to the school work coordinator, and the DVR counselor.

Figure Two, Table VII, and Table VIII indicate a diversity of contacts and situational arrangements. It was felt that these activities helped rehabilitate clients and lessened the time spent in vocational process.

The school district has used the services of social work for some time within its total overall program. In other agencies throughout the Portland Metropolitan area the emphasis is basic case work. Project

1681 indicated a need for social work services that centered, apparently, between these two areas.

The field representative, in some instances, could help counsel clients and families toward realistic personal goals and provide guidance in social patterns.

To obtain an estimate of the kinds of socially oriented problems found with part of the Project population the first 109 closed cases were examined for content. The project and school files gave information of a social nature that might reflect on vocational potential. Table IX records the instances of "problems" found with this sample. In many samples more than one instance was noted.

Table IX - Instances of Socially Oriented Problems
Found in Client Files of 109 Closed Cases

	Instances
Communications (lack of ability to adequately relate to others)	32
Lack of parental rapport to the child	25
Poor attitude toward work	25
Poor attitude toward people	24
Over protection by parents	23
Lack of confidence by client	18
Lack of security in home	17
Lack of immaturity	16
Poor appearance	15
Bizarreness	15
Client and/or family overestimate of ability	15
Client and/or family underestimate of ability	13
Parental uncooperativeness to school and project	13
Extreme sensitivity to special education program	11
Juvenile record	9
Talks inappropriately loud	9
Overly verbose	8
Hyperactive	7
Nervousness	5
Sex related problems	2
	302
	M = 2.77

Several of the characteristics shown in Table IX are closely related; nevertheless, they give an estimate of the number of instances found and the types of problems associated with many clients. Table IX suggests that many kinds of "social service," or "social modifications," may be needed as a factor to successful rehabilitation.

The socio-economic level is often associated with the degree of necessary social work. It has been pointed out that poverty and social conditions bring forth a need for social work because of the many problems inherent in relationships with general society.

To estimate the socio-economic status of the first 154 clients to Project 1681, a review was made of client files to determine this characteristic. Using a figure, economically, of less than $4000 annual income as low, and a figure above $8000 annual income as high, an estimate could be made from information on school intake records and client social summaries. In several instances, the quoted figures were modified depending upon the number of children in a family or the particular situation found to exist.

Table X - Socio-economic Estimates of the
First 154 Clients of Project 1681

	Female	Male	Totals	% of Total
High	3	1	4	2.6
Middle	55	37	92	59.7
Low	29	29	58	37.7
Totals	87	67	154	100.0

The information in Table X estimates that better than 1/3 of the project clients will come from an environment of a low socio-economic level. This data suggests a need for the existence of a social worker, if it can be assumed this factor is highly correlated with social work needs.

Summary

Data from Table VII through Table X and information collected for Question Two gave evidence that many factors need to be considered in answering the basic social problem. The following characteristics were noted:

(1) The activities of the field representative are diverse and numerous.

(2) The nature of the social work requires several (in excess of three) contacts per family.

(3) Data of a social nature expands the information that can be used for client rehabilitation.

(4) Many community agencies can be utilized in the rehabilitation process.

(5) The client population represents a group with many socially oriented problems.

(6) Approximately 1/3 of the client population comes from a low socio-economic environment.

(7) The field representative's activities centered about information collecting and exchange, and work with clients and/or concerned families.

(8) The field representative's work did not consist of "long-term" treatment programs.

(3) Does a job placement follow (or coincide) with information available on a student?

The question of getting a job, how it comes about, processes involved, and the structural influences seemingly vary for many particular situations. Several writers, from several kinds of disciplines, have expressed different points of view that result in conflicting ideas of employment.

Job placement may be defined in general terms of requirements. Lofquist, et al (1963), for example, divides work into two sets--ability and "needs." Ability refers to aptitudes of the individual and/or the job while "needs" suggest a set of social and human interactions of the individual and/or job. With this kind of concept in mind, several characteristics of Project 1681 were reviewed to determine what information might be used as a basis in answering Question Three.

One concern was the status of clients after rehabilitative work had been done. The figures of client status give information about job placements. Table XI indicates the disposition or current position of students seen by this project (as of 3-10-68).

Table XI - Status of Project 1681 Clients
as of 3-10-68

				N	Totals
Closed					135
Rehabilitated				69 (51.1%)	
Male		41			
Female		28			
regular employment*			(48)		
Male		33			
Female		15			
mean salary					
** Male	$1.85				
** Female	1.42				
military service		3	(3)		
housewife		2	(2)		
sheltered workshop					
Male		5			
Female		10	(15)		
student					
Female		1	(1)		

Not rehabilitated			66 (48.9%)
Male	31		
Female	35		
Closed before plans		(31)	
Male	18		
Female	13		
Closed after plans		(20)	
Male	7		
Female	13		
Closed after plans--before training		(15)	
Male	6		
Female	9		
Open			52
In evaluation process		(26)	
Male	16		
Female	10		
Work adjustment training		(7)	
Male	3		
Female	4		
Vocational training		(8)	
Male	3		
Female	5		
Employment tryout		(8)	
Male	3		
Female	5		
Sheltered employment tryout		(1)	
Male	0		
Female	1		
Seeking employment		(2)	
Male	1		
Female	1		
			N = 187 clients

Referrals to Project (not yet clients but in process)		(17)
Male	9	
Female	8	
Referrals to Project (inactive and pending)		(149)
Totals =		353

* list of specific jobs are reported in Table XV

** does not include sheltered workshop employment or housewives

Table XI indicates approximately 51% of the referred clients were rehabilitated to the extent that they will be job holders and able to operate in the community, while nearly 49% are not rehabilitated to this extent.

Normally the two groups, rehabilitated vs. non-rehabilitated, would form convenient groups for comparison. This however was not necessarily true. Upon inspection of the information obtained on the two group samples, one finds that many positive activities happened with the non-rehabilitated group. Moving, finding work, and marriage cannot be construed as totally negative to the client's vocational potential. Still, taken as a group, they indicate differences when compared to each other. Table XII details the non-rehabilitated group shown in Table XI.

Table XII - Project 1681 Cases Closed as Not Rehabilitated

A. Cases Closed Before Plan Were Initiated. (as of 3-10-68)

Males

Found job	7
Moved out of district	1
Need of medical and/or psychiatric care	2
Family would not support program	6
Immaturity toward work	2
Totals	18

Females

		Totals
Found job	5	(12)
Moved out of district	1	(2)
Need of medical and/or psychiatric care	1	(3)
Family would not support program	1	(7)
Immaturity toward work	2	(4)
Married and not seeking employment	3	(3)
Totals	13	(31)

B. Cases Closed After Plans Were Initiated.

Males

Had jobs but left and lost contact	3
Not sheltered-work employable	2
Need of medical and/or psychiatric care	1
Immaturity toward work	1
Totals	7

Females

		Totals
Had jobs but left and lost contact	4	(7)
Not sheltered-work employable	3	(5)
Need of medical and/or psychiatric care	1	(2)
Immaturity toward work	1	(2)
Married and not seeking employment	4	(4)
Totals	13	(20)

C. Cases Closed After Plans and Before Training.

Males

Moved out of district	2
Family would not support program	1
Immaturity toward work	3
Total	6

Females

		Totals
Moved out of district	0	(2)
Family would not support program	2	(3)
Immaturity toward work	1	(4)
Found job	3	(3)
Married and not seeking employment	3	(3)
Totals	9	(15)

N = 66

Table XII indicates, of 66 cases closed as non-rehabilitated, fifteen found jobs, ten married and were not seeking employment, and four moved from the district. This does not mean that the activity was necessarily consistent with the client's physical and mental capacities, interests, and personal characteristics.

A review was made of the two groups of closed cases in Table XI. Information regarding several factors of job placements and client characteristics were found in Project files. Data was grouped for comparison purposes and tabulated on an "as-of-when-placed-on-a-job-and-to-the-particular-job" basis. Table XIII gives the results of this review with figures reported in per cents of time. (Listed factors formed convenient chi-square contingency tables and statistical significance, at .01 level, results are shown (Garrett, 1965).) The table does not include those married and not seeking employment or those moved from the district in the non-rehabilitated group. Also, four clients were excluded for the rehabilitated group for reasons discussed in subsequent problems (see Question #6).

Table XIII - Characteristics of Jobs and Clients
to Employment Opportunities

Factors	Rehabilitated (N = 65) Yes %	Rehabilitated (N = 65) No %	Not Rehabilitated (N = 51) Yes %	Not Rehabilitated (N = 51) No %
1 - Client Support	96	4	91	9
2 - Counselor Support	98	2	75	25*
3 - Aptitude Fit	85	15	70	30
4 - Social Fit	98	2	71	29*
5 - Respect for Authority	82	18	48	52*
6 - Accepts Criticism	79	21	36	64*
7 - Appropriate Behavior	93	7	57	43*
8 - Good Work Habits	98	2	68	32*
9 - Good Appearance	87	13	64	36*
10 - Good Physical Makeup	92	8	93	7
11 - Good Attendance	92	8	55	45*
12 - Union Entrance	8	92	25	75
13 - Apprenticeship Needed	5	95	9	91
14 - Test Required	4	96	4	96
15 - Speed Needed	75	25	79	21
16 - Public Contact	28	72	43	57

	Rehabilitated Good	Rehabilitated Medium	Rehabilitated Poor	Not Rehabilitated Good	Not Rehabilitated Medium	Not Rehabilitated Poor
17 - Openings	23	62	15	25	39	36*
18 - Appropriate Training Fit	52	33	15	10	50	40*

a - eye-hand coordination, dexterity, etc. b - interpersonal relationships. c - rapport with fellow workers. d - attention to work. e - similar training to job, WAT, or OJT, etc.

* $P < .01$

Of 65 placements made by the project, Table XIII suggests that information in regard to a client was used to advantage in job placements. In 51 opportunities in which rehabilitation did not take place and jobs were not counseled through the project, information appears to be less appropriately utilized. Specific factors that appear to be different are counselor support of the work, social fit to the job, information concerning the client's respect for authority, whether or not the client accepts criticism appropriately, if the client has appropriate behavior in working with other employees, and work habits of the individual. In addition, appearance, attendance, the amount of openings in the job structure, and an appropriate training fit influence differences between groups.

It is interesting to note that jobs requiring public contact, union entrance, apprenticeship, and testing tend to be avoided or, perhaps, circumvented. Client support, physical makeup to the job, and the need of speed were similar for both groups.

Another source of information relating individual clients to work potential, was available school files and statements made by teachers and school-work coordinators. Information about classroom activities and work experience gave clues to the work potential.

With regard to work potential, two kinds of information might be useful for decision making. The first area gave data in regard to school achievement that would relate to employment. Such factors as academic work, sociability, physical education, and communications in classroom activities might help in the decision making-counseling process.

A second area regarded as informative, was evaluative information concerning in and out-of-school work experiences. Data concerning work habits as they might relate to employment could prove invaluable. Factors might be those relating to aptitudes (coordination, dexterity, etc.), sociability on job, communicational ability during work, and an estimate of the worker's motivation to work.

A review of school reports was made to determine if the above characteristics were given. Table XIV reports this data in terms of percentage of times a factor is reported. The sample consisted of 135 closed cases listed in Table XI.

Table XIV - Percentage of Times Work Information Was Reported in Selected School Records of 135 Project 1681 Closed Cases

1 - Report of academic achievement	67.4%
2 - Report of sociability in classroom	88.3%
3 - Report of physical education ability	13.9%
4 - Communicative ability in the classroom	60.4%
5 - Estimate of work aptitudes (coordination, dexterity, etc.)	9.3%
6 - Social behavior on work experience	81.3%
7 - Communicative ability on work experience	55.8%
8 - Estimate of motivation toward work	34.8%

There appear to be several surprising features of data reported in Table XIV. Emphasis in reporting seems to be socially and academically oriented and appears appropriate for estimating some work potentials. Much less information is offered about physical characteristics (motor involvement) as it could relate to future employment. Furthermore, information regarding school academic achievement, communications, and motivation toward work was apparently not consistent. Table XIV suggests, however, a better system is needed for work information as it might relate to future employment.

The kinds of jobs and training, in broad terms, for work would be pertinent information regarding client employment. Table XV lists the kinds of employment of 66 closed rehabilitated cases. The table further suggests whether or not compatible, fair, or poor training was given to the client with respect to the particular job. Training could have been in or out of school experience or with Project 1631. Further, an estimate was made of the openings available in the kind of work with reference to the community and "climate" of this employment at the particular time of the initial work.

Table XV - Kinds of Employment and Their Relationship to Training and Openings of 66 Selected Employed Clients

Job Area	N	Training Comp.	Training Fair	Training Poor	Openings Good	Openings Fair	Openings Poor
Busboy	5	3	-	2	5	-	-
Waitress	4	4	-	-	4	-	-
Food preparation	3	3	-	-	3	-	-
Delivery	3	-	3	-	-	2	1
Maintenance	8	6	1	1	6	2	-
Forestry	2	-	1	1	-	2	-
Car detailer	2	2	-	-	-	2	-
Construction	4	1	1	2	-	2	2
Automotive parts	1	-	1	-	-	1	-
Custodial	4	4	-	-	3	-	1
Grinderman	1	-	-	1	-	-	1
Dental aide	3	3	-	-	-	2	1
Burner	1	-	1	-	-	-	1
Photo-developer	2	-	2	-	-	-	2
Small appl. repair	1	1	-	-	-	1	-
Locker boy	1	-	-	1	-	1	-
Sorter	4	1	3	-	2	2	-
Assembly	5	3	2	-	3	2	-
Power machine	4	4	-	-	2	1	1
Laundry	2	-	2	-	-	1	1
Office clerk	2	2	-	-	-	1	1
Nurses aide	2	2	-	-	2	-	-
House service	1	-	1	-	-	1	-
Beauty operation	1	1	-	-	1	-	-
Totals	66	40	18	8	31	23	12

The data in Table XV indicates school or project training was many times compatible to employment for this selected sample. The data on openings reflects, somewhat, the nature of the employment structure in the community. Time and place, apparently, does not play a large role with this group.

The kinds of training to be reported later (See Question Ten) were found in the school work-experience program, project community resources, and Goodwill Industries. A variety of job training opportunities was maintained. As pointed out previously the "direction" a client would take in most instances depends upon the evaluation and his interests. This would tend to make the available information follow, or coincide, with employment.

The last entry of Table XI lists 149 referrals to this project that are inactive and pending. Early in the project, consideration was given to referring the complete graduating senior class as Project 1681 clients. This is no longer a consideration. This had a tendency to enlarge the number of referrals in the beginning of the project. However, there are several reasons why many of these students did not become clients of Project 1681.

Approximately 32% (N = 48) were not accepted as clients because they had jobs that appeared commensurate with their ability. Four persons were drafted into military service, five girls married and were not seeking employment, two were pregnant, five moved out of the state, three were institutionalized, one could not be found, and four were referred to other appropriate projects. This latter group, taken together, consisted of 16% (N = 24) of this total. 22% (N = 33) gave "no reason" for not accepting the student to the project. Many in this group were persons who gained school work experience and were brought to the attention of the project for later referral.

The rest, 30% (N = 44), have reason worthy of discussion. These reasons included lack of motivation, parental objections, lack of social adjustment, medical/psychological problems, or the potential client simply did not want to bother. Lack of student motivation was also a contributing factor.

Parental objections consisted of negative feelings with anything connected with Special Education or Goodwill.

Summary

Information collected in regard to Question Three and the information shown in Tables XI through XV concerns the problem of client placement.

(1) Based upon the project sample, better than half of the clients were rehabilitated.

(2) About 15% of those rehabilitated were sheltered-workshop employable only.

(3) The mean salary of male rehabilitants represents a low standard of economic level.

(4) The mean salary of female rehabilitants represents a very low standard of economic level.

(5) Non-rehabilitated clients show evidence of gaining benefits from the project processes.

(6) Differences are evidenced in several factors relating to information between rehabilitated and non-rehabilitated clients.

(7) There are indications that school information, as it relates to work, needs to be accumulated more efficiently.

(8) A training-to-employment "fit" is generally appropriate and precedes employment.

(9) Usually, information about a client leads to compatible employment areas.

(10) Job openings are moderately available for the kinds of employment reported.

(4) What does the follow-up on job placement show as to curriculum prevocational needs?

A problem that persists in the rehabilitation process is the relationship of job and/or placement to curriculum needs of clients in a total program for the retarded. Most literature on work deals with skilled and professional areas that would relate to school offerings. Important factors in work activities of the retarded are curricula relationships for which the school may plan realistically. Each client in this project was probably unique; however, groupings of sorts might give information pertienent to curricula planning.

The Department of Child Services has kept records of special education graduates for a number of years. The school work coordinators have attempted to make a survey of each year's graduates. June graduates are surveyed the following October or November (6 to 7 months after graduation). An additional follow-up is made of the students who graduated three years previously. Information collected from the follow-up surveys is shown in Table XVI.

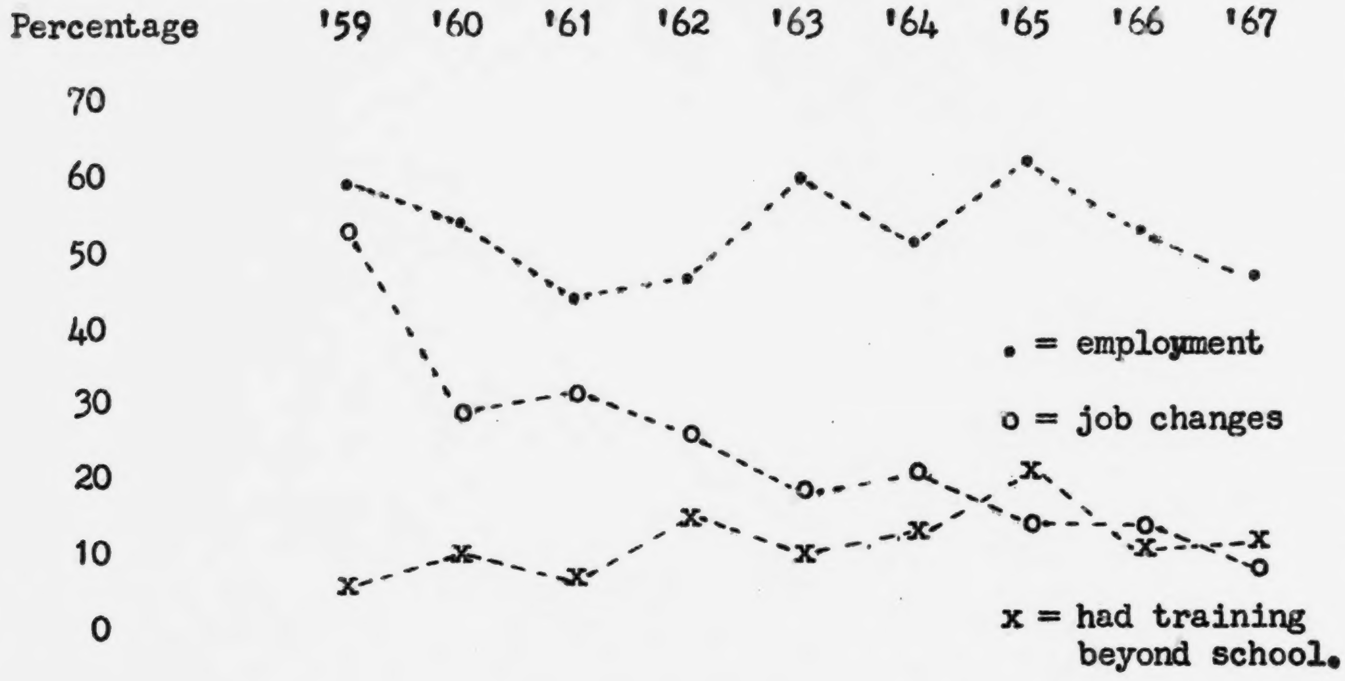
Information from these reports can be considered only tentative; however, trends can be noted if it can be assumed that changes would be similar for all groups. In terms of percentages, the following table indicates various estimates of former graduates and their present work status.

Table XVI - Status of Graduates from Portland Special Education Program

Year =	1959	1960	1961	1962	1963	1964	1965	1966	1967
N =	24	37	50	66	79	96	90	82	92
Status	Percentage of Graduating Total								
Employed	58%	54%	42%	45%	58%	54%	63%	59%	50%
Military Service	0	8	6	6	3	2	17	7	8
Married (female)	13	14	26	18	11	7	6	7	5
Training/school	0	0	0	0	2	4	4	13	17
Cannot locate	25	8	18	17	13	20	2	6	3
Unemployed	4	8	18	14	13	13	7	7	15
Institution	0	0	0	0	0	0	1	1	2

Of those employed, which includes a small percentage of sheltered workshop employees, it is interesting to note the relationship between training, job changes, and employment. Figure Three diagrams this relationship.

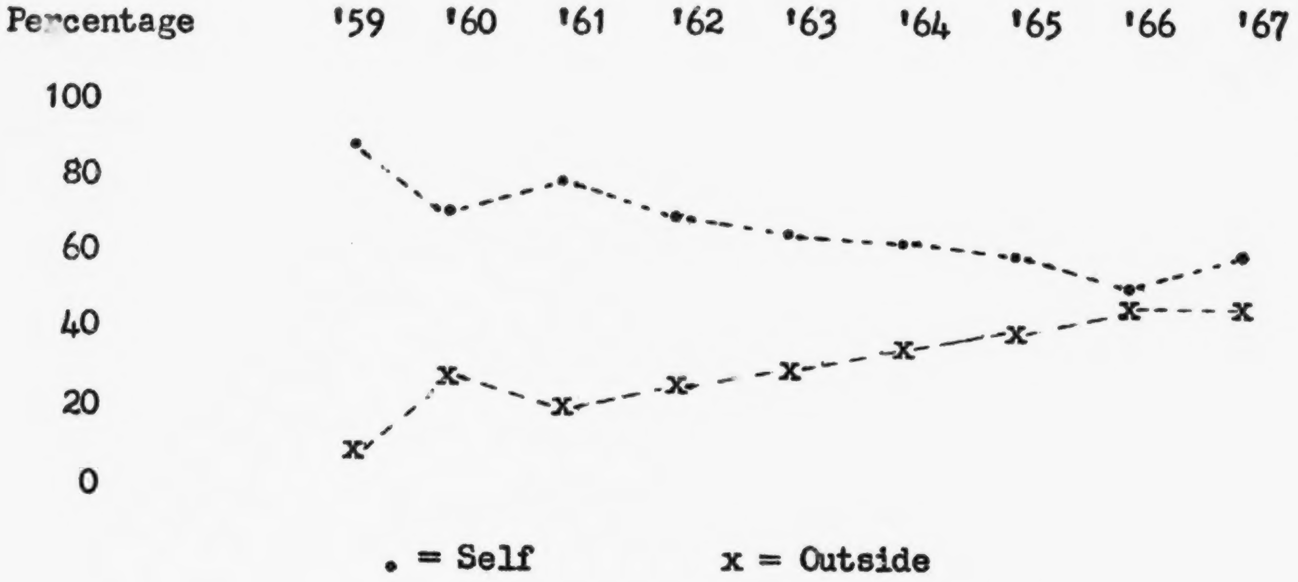
Figure Three - Relationship Between Training, Job changes, and Employment of Graduates from Table XVI.



It is notable that "job changes" have become less frequent with this sample, indicating perhaps the influence and intensity of curricula concerns for employment. The years of 1964, 1965, and 1966 are noteworthy because in a small way this period of time as shown in Figure Three displays a trend in stable employment. The figure, however, is somewhat clouded since a larger percentage of graduates are now in training situations.

Collecting information for Table XVI indicated how employment was found. Self application accounts for the major share of job finding. Related to self application are help from family and friends in getting a job. Outside influences are apparently most notably felt by the school work coordinator, DVR, and, to minor extent, the U.S. Employment Service. These two areas may be roughly divided into broad categories of "Self" influence and "Outside" influence. This relationship is shown in Figure Four.

Figure Four - Relationship Between "Self" and "Outside" Influence of Job Findings of Graduates in Table XVI.



Although many graduates will find employment through their own initiative the school is becoming more and more helpful in finding the correct job. It seems possible that the school curriculum has some success in decreasing the amount of turnover and increasing the job-holding ability of students. Part of this trend has probably been influenced by more training opportunities for work by Project 1681. This suggests an emphasis "trend" by the school district in vocational planning.

The curriculum objectives were grouped for "successful" clients, meaning they are holding a job and have done so for at least three months, and the employer has indicated that the client is doing well. Conversely, the "unsuccessful" client was one who could not meet the above criteria but did have one or more jobs during the time he was a client. The comparison did not include marriage, moving, etc. as a consideration; only those clients who actually worked in an employment situation were part of the sample. Estimates were made on 35 "successful" and 28 "unsuccessful" clients. The data was examined, statistically, by chi-square contingency table to indicate a degree of differences between groups (Garrett, 1960, pp. 264-265). An * indicates an .01 level statistical difference, ** indicates an .05 level, and *** indicates an .10 level of statistical difference between groups.

Table XVII - A Comparison of Selected Curriculum Objectives to Successful and Unsuccessful Clients

		Groups			
	Objectives	Successful		Unsuccessful	
		Yes	No	Yes	No
(1)	grooms and dresses suitably for different purposes.	28	7	11	6
(2)	shows willingness to work at tasks needed to be done.	30	5	12	13*
(3)	strives to be honest.	33	1	15	10*
(4)	strives to be reliable.	33	1	10	15*
(5)	shows consideration and respect for others.	32	3	15	12*
(6)	expresses emotions appropriately.	18	16	10	14
(7)	accepts his limitations.	20	14	5	18*
(8)	aware of when and how to seek assistance,	19	16	12	14
(9)	meets and talks with people confidently.	19	16	14	12
(10)	accepts and copes with criticism adequately	22	13	6	16*
(11)	adjusts appropriately to rules and regulations.	33	2	8	17*
(12)	respects the rights and property of others.	30	--	15	4* (a)
(13)	manifests a loyal feeling to one's company.	19	6	8	10**
(14)	responsible for supplies and equipment.	25	1	15	4*** (a)
(15)	assists in the performance of household duties.	16	11	12	7
(16)	manifests a loyal feeling for family.	23	5	12	10**
(17)	responsible in use and care of one's possessions.	25	--	18	2

Objectives	Groups			
	Successful		Unsuccessful	
	Yes	No	Yes	No
(18) participates in family leisure and recreational activities.	15	2	7	5***(a)
(19) competent in traveling alone.	32	2	28	--
(20) familiar with physical and geographical features of community.	29	4	23	1
(21) gives attention appropriately.	18	8	10	13***
(22) copes with distractions.	19	15	6	18**
(23) uses appropriate facial expressions.	28	7	17	8
(24) can verbally explain things.	25	10	20	5
(25) uses words correctly in conversation.	27	8	21	5
(26) can make use of the newspaper.	18	13	5	12***
(27) interprets schedules (bus, etc.)	18	13	12	9
(28) drives a car.	15	20	4	20
(29) can fill out written forms correctly.	14	19	8	15
(30) possesses a meaningful arithmetic vocabulary.	19	13	9	14
(31) can make change.	28	2	20	5
(32) can tell time.	34	1	24	2
(33) can tell distance.	24	8	20	3
(34) can tell amounts.	16	13	7	11
(35) can estimate figures.	6	18	3	14
(36) appreciates any kind of art work.	11	12	3	17**
(37) is courteous.	32	2	23	4
(38) cooperates with fellow workers.	34	1	14	8*
(39) distinguishes between work and play.	31	4	6	16*
(40) adheres to break privilege time schedules.	32	4	10	12*

Objectives	Groups Successful Yes	 No	 Unsuccessful Yes	 No
(41) has good attendance in work.	32	2	15	9**
(42) has confidence in work ability.	31	3	19	5
(43) has good eye-hand coordination.	26	8	11	12**
(44) has good dexterity.	24	10	11	12***
(45) has good performance speed.	19	15	10	12***
(46) can alphabetize.	15	8	15	6
(47) relates well to supervision.	30	4	13	10*
(48) can work independently.	28	6	8	15*
(49) has tolerance for production pressures.	23	5	4	17*
(50) can discriminate between forms.	15	8	9	8
(51) observes well.	16	8	5	12**
(52) can use work tools.	25	--	19	1
(53) washes and bathes regularly.	27	6	12	12*
(54) makes attempt to be physically fit.	23	7	13	11***
(55) has general family support.	24	8	10	13**
(56) liked by peer groups.	23	2	14	3

Table XVII suggests that those who appeared successful in employment situations, and were different from unsuccessful groups, were those who developed some personal and interpersonal habits that were compatible with the employment situation. Observing well, honesty, and reliability, supported by related factors, seem to be characteristics that discriminate between the employed. Client attendance practices and respect for other's rights and property support the successful. If the client is able to accept his own limitations, this personal attribute seems to help his job-holding abilities.

A supervisory factor seems apparent. Curricula competencies seemed to be well recognized by the employers. Characteristics relating to adjustments of rules and regulations, "break" privileges, the employer, and coping with criticisms are discriminating factors with this sample. Employment practices associated with production pressures, assigned tasks (especially those that may not have been specifically part of the job description), loyalty, and independent working ability are factors that seem to relate to overall supervision areas, and, from Table XVII, suggest significant differences.

Interpersonal relationships that include cooperation with fellow workers, distinguishing between work and play, coping with distraction, and respect for others are other discriminatory characteristics.

Other factors, related directly, or indirectly to the above characteristics, are the client's family rapport and support to work stations, personal health practices, and eye-hand coordination. It is interesting to note how closely these estimates agree with the studies of Kolstoe (1961), and others. In all, this follow-up tends to agree with the principle that rehabilitation for the retarded, as judged by this sample, offers no simple solution. Further, most results suggest the imperative need for supervision at many levels and in several areas of concern.

Another interesting study was personal interviews made by the staff social worker of thirty former clients who had been successfully employed a minimum of five months. An attempt was made, by means of a scheduled interview, to gain information of a personal nature concerning several implied characteristics in Table XVII. Those interviewed represent a sample of clients (N = 30) who are employed successfully.

When asked about friends, this sample indicated they had people whom they could call a friend (only one did not so indicate). Usually they said "lots" when asked amounts, with the response "a few" gaining second most frequency. When asked "why" they had friends, most responded with nondefinitive phrases like, "I'm friendly," "I get along," "We just get together and talk," "People are nice to me," and similar expressions. Most "friends," however, were co-workers at a place of employment. Further, this sample regarded their association with people in a positive manner suggesting an easy rapport and a genuine liking to be around others.

When asked about family living, it was found that two of this sample were maintaining their own household. Eighty percent made a positive response to living at home and responded with phrases like "Mom's a good cook," "we get along well," "home is a warm feeling," "I want to wait awhile," "I wouldn't make it on my own," and "I want to earn more money first." These last responses, apparently, suggested a maturity in thinking with regard to self sufficiency. Of the negative responses (N = 6) four indicated they were "picked on" by members of the family, while two said they would like to get away because the parents argued.

When asked about problems of the city, nine answered with concerns of the Negro, riots, and people not getting along; four talked about pollution. Nationwide concerns were evidenced by discussion of the Viet Nam conflict, riots, crime, taxes, and recreation areas. Still

33% gave "I don't know" answers of national concern, suggesting, of this sample, most had knowledge of and were forming opinions of local concerns.

Most of this sample indicated they read the newspaper and read magazines of several descriptions. Nine individuals indicated they "wanted to find out what's going on" when asked why they used these materials. A few indicated they have their mother help them in some reading matters. Help was evident in tax returns and some 80% said theirs had been done.

Twenty-eight of the subjects had a savings account and three had an additional checking account. Half of the sample, are, or were, buying something on credit; however, a few were doing so on parent credit cards. Most gave good thought to their spending habits and had responsibilities such as room and board. Approximately 50% budgeted money and planned ahead as to how they would use income. Clothes, bus fare, and bills were frequently mentioned items that were to be budgeted.

Fifty percent of these subjects indicated they had recently repaired or made something. No one single item seemed to be in evidence and the list included bed sets, TV, stereo, clothes, radio, lamps, and cars. Seventy-five percent had lost at least a day's work due to illness and said they stayed home and rested, while two said they went to the doctor. Ninety-five percent said they had a family physician and most had some kind of health insurance.

With respect to "free time," most subjects indicated that watching TV, doing chores, seeing friends, and walking occupied their leisure time. Eight subjects said they belong to a church, but no other "group" activity was mentioned. Recreational activities were discussed and twelve mentioned spectator sports--mostly on television. However, nineteen said they participated in sports activities with bowling, swimming, and ice skating mentioned most often. Outdoor activities, such as golf, hunting, camping, or fishing, were indicated but once.

The information collected from interview schedules suggests close agreement with the successful clients of Table XVII. Rapport with people, a good self-concept, adequate family relations, and the ability to generally function as a citizen tended to be characteristic of this sample.

Summary

The data for Question Four and information collected throughout this study indicate the following student characteristics:

(1) Training shows a positive relationship to employment.

(2) There is some indication that "job changes" are less frequent with recent graduates.

(3) Information on recent graduates (1965, 1966, 1967) suggests a higher percentage of vocational self-sufficiency.

(4) The trend of job finding is becoming more influenced by school-DVR programs.

(5) The data suggests that curricula areas are complex and difficult to assign an absolute priority. The ability to carry on good interpersonal relationships, clear communications, adequate work relationships that include supervisory concerns, "pace" of work, aptitudes, and appropriate family and personal characteristics seem to favor those that tend to be successful in employment.

(6) There appears to be a need for many of the retarded to have "help" at times beyond school graduation.

(7) The EMR graduates, of this sample, give indications of difficulties in routine matters of "what to do" and "where to go" with leisure activities, travel, and many governmental and business operations (particularly credit).

(5) To what extent is the present medical information obtained and needed by the school proving to be necessary and adequate to the vocational rehabilitation client? Is the same kind of medical information indicated for all other graduating seniors in the program for the mentally retarded?

Certain medical information is essential in the vocational planning for rehabilitation of a client. Perceptual difficulties, allergies, disease, and certain other physical conditions have real implications for job placements and/or training.

Within the framework of Project 1681 three files of information were available. Records kept at the district Child Services Department, school cumulative records at each school building, and the project client file had health and medical information. The purposes, however, were different in that Child Services files were for certification, school files for health, and project files for vocational functions.

The Child Services files kept an account consistent with basic certification procedures for the State of Oregon. This account included a developmental history (which sometimes held some medical information) and a physician's statement. These statements, with other pertinent data, were sent to state offices for the purposes of certification and indicated retardation.

The school building kept cumulative records which basically intended to gather information that might help the individual's educational progress. Health cards and incidental information were part of these records.

The project files utilized information collected from Child Services records and medical examinations for each client. Medical examinations are traditional in this state for DVR clients and are further reviewed by a consulting staff DVR physician and acted upon by him through the DVR counselor. The medical folder became part of the client's file and was used as part of the total vocational evaluation.

Investigations of the three kinds of files were made to estimate what might be best indicated for vocational evaluation and what may be needed within the framework of the school district.

The first 100 client files were reviewed with regard to information from medical examinations required by Project procedures. In many instances, more than one factor was evident. Table XVIII indicates the nature of these examinations.

Table XVIII - Medical Information of 100 Project Clients

A. Clients with negative findings		28
B. Clients with medical examiner's recommendations to be examined by a specialist		30
ophthalmological	13	
psychiatric	8	
neurological	5	
dental	5	
individual cases	7	
	38*	
C. Clients with medical examiner's observation of known problem and attention called to:		42
eye, ear, nose, or throat	15	
dental	9	
nervous system	8	
emotional problem	6	
skeletal-muscular	6	
obesity	5	
uro-genital	4	
chemical	2	
individual cases	4	
	59**	

* 8 clients had two recommendations each.
** 17 clients had more than one observation.

Table XVIII indicates approximately 30% of those examined were recommended by the attending physician to be examined more thoroughly. 42% had less intense problems, but were nevertheless indicated as factors. 28% of the examined clients had negative findings. In all, some 72% of the examined clients of this sample had medically oriented problems that might affect vocational potential.

In an effort to make a comparison of the medical examination required for certification to the DVR examination required by the project, twenty-nine medical reports were retrieved from the State Department of Education. Of these twenty-nine statements, seven gave essentially the same information as the project's records; however, twenty-two did not. In this limited sample some 75% of the project's medical records gained new information, suggesting the medical history changed from the time of certification to becoming a project client, or that the previous examination was insufficiently comprehensive.

Five of the retrieved statements from the State Department held information that had not been discovered from any other source available. These included the following:

(1) An EEG had been given, diagnosed as brain damage, mild incoordination of legs, and a slight palsy. If this had been known it would not have been necessary to have a new examination.

(2) The client had a history of slight convulsions. The prescribed medication had sometimes caused involuntary urination.

(3) The client had a past history of heart murmur.

(4) The client had a chest deformity.

(5) The client had a history of slight epilepsy (psychomotor equivalent).

By comparing the Project medical files to those of Child Services and the school records, estimates were made of what new information was gained. Considering these three sources, the project examinations found the following problems not noted in others:

9 cases involving eye, ears, nose and throat
8 dental problems
4 urogenital disorders
6 skin problems including allergies
7 one each of cases that included scoliosis, a heart problem, syphilis, lung congestion, nervous disorder, intestinal disorder, and muscular disorder

It is likely that the above problems could have an effect on vocational placement and/or training. The above figures account for 34% of the clients of the first one hundred clients.

By comparing the records from the three available sources, it was possible to determine the "likeness" of one to the other considering accumulative information of health-medical data only.

Table XIX - Comparison of Health-Medical Information From Three Sources of 100 Clients

	Project vs. Child Services	Project vs. School	Child Services vs. School
Same	73	78	79
Different	26	21	20

This information suggests an approximate 20% to 26% difference from one information source to another.

It was evident that medical information could help to determine the direction of rehabilitation planning. Such information may help to determine areas in which a person can or cannot perform.

The population sample may account for some of the above findings. Where the socioeconomic level was low many corrective procedures had been neglected by the family. In this sample, as indicated by Table X, some 33% of the clients could be classified as coming from a low socioeconomic environment. In other situations social ineptness may account for this kind of disregard.

Of the first 100 clients examined, twenty-three were found to have limiting factors other than retardation. Disregarding corrective glasses and dental caries, secondary and multiple health-medical factors included:

9 mild to moderate epilepsy
4 vision (not correctable with glasses)
3 skeletal defects

2 physical handicaps (exclusive of palsy)
1 asthmatic
1 anemia

7 mild palsy
3 speech impediments
3 hearing defects (not correctable with hearing aid)

1 spastic bowel
1 diabetic

The project was able to counsel and help correct many instances of medically oriented disabilities. In several cases this consisted of helping with direction; while in others specific treatments could be made such as diets, psychiatric therapy, neurologicals, hearing aides, glasses, dental work, etc. There were several highly successful cases in which prescribed medicine aided the vocational competency of the individual.

Summary

Information relating to health-medical characteristics of 100 clients was reviewed. Data was collected from three sources including the project files, school records, and Child Services records. Table XVIII and information collected concerning Question Five and shown in Table XVIII and IX suggest the following:

(1) Health-medical information is pertinent to vocational potential.

(2) Approximately 35% to 40% of this sample appear to have negative medical findings.

(3) Approximately 30% of this sample was recommended for further medical special examination.

(4) The project operation could help some clients in health-medical problems.

(5) There were differences of approximately 25% in information relating to health-medical data among the available sources.

(6) Many clients displayed a health-medical change from the time of certification to the time of project client status. This is assuming that medical reports each time were truly reflective of the client's condition.

(7) The data suggests more intensified attention be paid to the areas of vision, hearing, and dental characteristics.

(8) The project physical examination helped significantly in the rehabilitation effort.

(9) There appears to be a positive relationship between socioeconomic level and health.

(6) Is there evidence showing the necessity of continuing a client on an inactive rehabilitation basis after vocational rehabilitation has been successful in placement?

The regulations of the Oregon DVR require that the client be notified when the case is to be closed. The reasons must be stated and the client's rights and privileges are outlined. This rule applies to successful or unsuccessful clients.

The successful client case is closed after an approximate employment period of three months. It might be pertinent, however, to know what happens to those persons after closure with respect to their livelihood.

Sixty-nine cases were closed as rehabilitated. A follow-up of these clients was made to determine, in general, how long they stayed in the work of their closure and what "turnover" there might be. Figure Five indicates the survival, in terms of percentage, of the job held at closure.

Figure Five - Survival Rate of 69 Clients as Rehabilitated

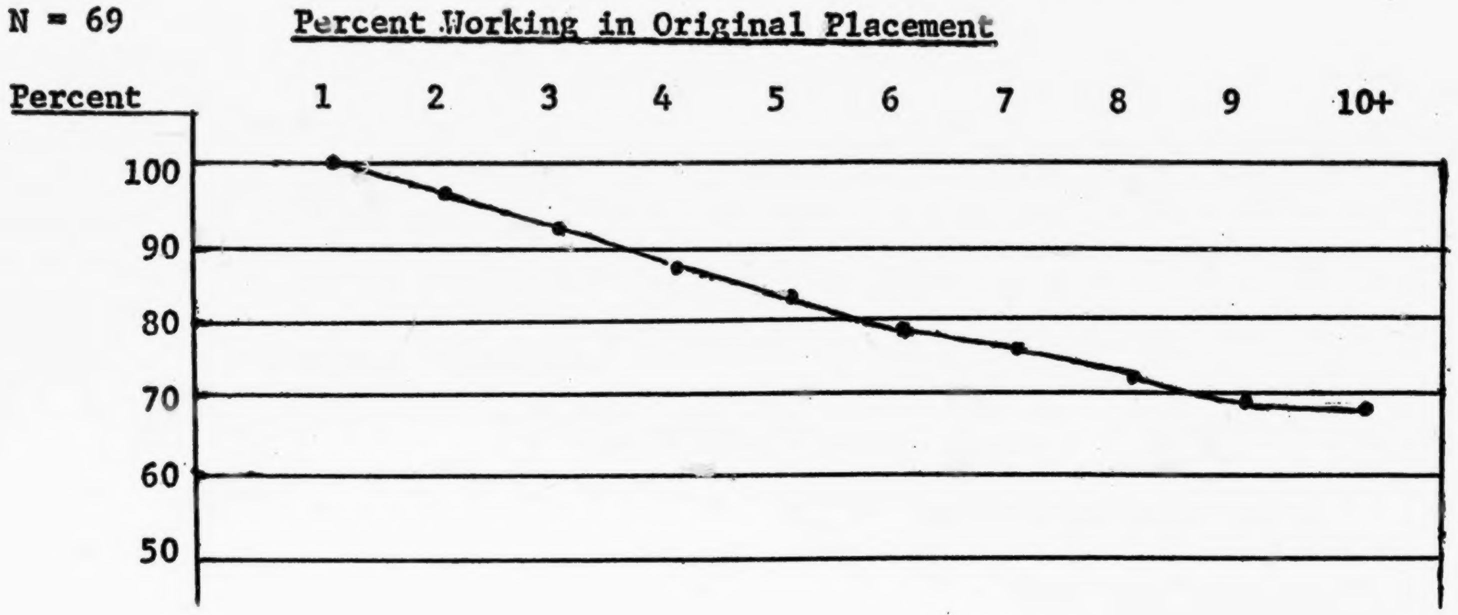


Figure Five indicates that 68.1% of the clients are on the same job as placed after a ten-month period, and 31.9% are not working at the same job ten months after closure. This percentage represents twenty-two clients who were fired, changed jobs, or quit. A breakdown was made of these clients:

Changed Jobs (N = 9)

2 boys were drafted into military service.

4 clients obtained work of the same kind, but new position offered more work and was closer to home.

3 clients applied for and found new jobs at a higher salary.

Quit Job (N = 5)

5 girls quit to be married.

Fired from Job (N = 8)

2 clients because of attendance problems

2 clients because of supervisor conflicts

1 client because of bizarre behavior (is now awaiting institutional care)

3 clients because of poor work record and/or production

Of the eight, or 11.6% fired from their jobs, two went into military service, two found jobs after a two-month layoff, and four are unemployed at present.

Only two clients requested further help from the project. As of this writing both are being re-trained. Communications indicated the former clients had plans of their own and did not want further help.

The survival rate figures do not appear to be out of line with estimates of entry job level positions taken from young workers not handicapped. In fact, the "change" rate of this sample indicates a rather optimistic picture when only four clients of the total could be considered not adjusted.

Summary

Figure Five and the other data indicate the following:

(1) The survival rate is approximately 88.4% of rehabilitated clients keeping and holding a job, or making an appropriate adjustment.

(2) DVR regulations make re-referral possible if wanted.

(3) Better than 65% of the closed rehabilitated client cases hold their jobs more than ten months.

(4) Tenure tends to hold clients to job.

(5) Within ten months, there is approximately a 32% turnover in placed clients.

(6) Military service, better jobs, and marriage patterns account for most of the placement turnover.

(7) Former clients seldom ask for help from DVR but seem to find new directions by themselves.

(8) Follow-up needs to be maintained with some rehabilitated clients.

(7) How much client supervision was provided by the vocational rehabilitation counselor?

The time spent to oversee, direct, or manage clients often depends upon the number and kinds of supervision needed. Part of the "involvement" problems have been summarized under Question One. Table V, for instance, indicates the average length of time from acceptance to closure will be about one year, two months and 28 days. The length of time was somewhat longer if Goodwill Industries was used for evaluation and training, suggesting perhaps the notion of "difficult" cases.

Table XX below summarizes the length of time and the recorded contacts made for the first 117 closed cases in four divisions. The mean contacts are shown under a variety of contacts made. These "contacts" are those recorded in project files and are in keeping with the DVR operational plans. It cannot be assumed, however, that the data in Table XX represents all contacts. As with any program dealing with human interaction much is left unsaid or unrecorded and Table XX is limited in this respect. Much communication by the DVR counselor is made among such persons as the field representative, school coordinator, and teachers that may or may not be recorded.

Table XX - Mean Contacts and Time Spent in Project
for 117 Closed Cases

	Groups	N		Mean time to closure		Mean contacts per client	
A.	rehabilitated	61		1 yr. 4 mo. 17 da.		21.67	
B.	closed before plans	24	56	9 mo. 2 da.	1 yr. 1 mo. 10 da.	6.08	= 12.28
C.	closed after plans	18		1 yr. 7 mo. 18 da.		18.67	
D.	closed after plans & before training	14		1 yr. 0 mo. 21 da.		14.71	
	N = 117			Mean per client = 1 yr., 2 mo., & 28 da.		17.18	

	Kind of Contact N =	A 61	B 24	C 18	D 14	Accumulated B, C, D, totals
1.	phone	1.77	1.29	1.33	1.00	3.62
2.	client	4.19	1.41	2.50	2.29	6.20
3.	employer	4.59	.42	2.38	.86	3.66
4.	family	3.01	1.21	3.83	1.57	6.61
5.	medical	1.41	2.04	1.39	1.43	4.86
6.	training	.26	.21	.17	.28	.66
7.	field representative	.13	.29	.33	.57	1.19
8.	school coordinator	.45	.21	.17	.71	1.09
9.	teacher	.39	.46	.83	1.42	2.71
10.	letters	1.44	1.33	3.61	1.57	6.51
11.	Goodwill Industries	3.74	.58	1.83	2.29	4.70
12.	YOC	.26	.13	--	.71	.84

Table XX presents some interesting data. The "kinds of contact" reflect a pattern of supervision that might be expected. In item 3, for instance, groups B and C would not get to an employment status consistently. The fewer contacts noted for B and C suggest part of the reasons for nonrehabilitation, namely, loss of contact and refusal of services through family support, immaturity, and movement. Medical factors are also involved as indicated by Table XII previously used in Question five.

The kinds of supervision appear somewhat different among groups A, B, C, and D. Group A tends to receive more contacts personally and through employers than other individual groups. However when the non-rehabilitated groups (B, C, D) are taken collectively, little difference is noted, except in those areas where one might suspect more or less intensive concern. The accumulative totals suggest more contact was made, or tried, in most areas of communication with the non-rehabilitated group.

The amount of supervision may well depend upon the personnel to serve the clients. When things do not go according to plan, how much time can be spent, and how may it be spent, in trying to make appropriate contacts? This, of course, is dependent upon time and place. Table XX suggests more time, or help, could be needed with individuals especially in training, social work, and family areas. To date the average DVR counselor caseload has been 45.25 clients. This figure, however, was modified by personnel changes and rapid growth of the program after one year's operation.

It is important to note the heavy concentration in employer contacts with Group A compared to other groups. Opportunity modifies this contact with the non-rehabilitated; however, the data suggests that perhaps more supervisory help might be profitable in employer contacts. This is an extremely complex area and satisfactory results are dependent upon individual employers in diverse situations. It is very important that the "not specially trained" employer gain an understanding of the client's peculiar characteristics.

Summary

Information from Table XX and other sources gave several factors that may be considered for Question Seven. The following were considered:

(1) Several kinds of supervision are used in the rehabilitation process for Project clients.

(2) Approximately half of the supervision is direct contact supervision.

(3) Time, and numbers affect the supervision problem.

(4) The non-rehabilitated client receives more contacts than the rehabilitated client.

(5) More supervisory time was needed in employer and training contacts.

(8) How can the work of vocational rehabilitation be evaluated considering this project sample and dual agency operation?

The above question relates to several observations already made. The functioning of staff personnel, for instance, was discussed in Questions One and Two. The discussion here centers on the broad area of administration and organizational procedures found to exist in this project. Operating procedures can affect the functioning of the staff, and it may be enlightening to study some of the factors that were evidenced in this program between two agencies (Department of Vocational Rehabilitation and the Portland School District).

The Project 1681 relationship was new to the Portland School District (PSD) and to the state of Oregon. The Eugene School District, Eugene, Oregon, and PSD had concurrent Projects, with Eugene pioneering a continuance program in 1967 (See RD 1498-SD listed in bibliography).

Recently, DVR had prepared a Cooperative Programs Handbook (1967) for counselors and supervisors. This manual indicates some of the concerns in operating procedures of "dual-agency" agreements.

This project has had the advantage of observing the general organizational pattern within the state of Oregon and, specifically, such operations as they exist locally. Additional observations were made in school districts outside the Portland School District. To give possible programs a wide perspective and to compare several kinds of organizations, this project was afforded information gathered from the following sources:

Eugene, Oregon Vocational Project
Tacoma, Washington Vocational Project
Minneapolis, Minnesota Vocational Project
Phoenix, Arizona, school program for educable retarded
Tucson, Arizona, school program for the educable retarded
Consultation from Oakland, California Vocational Project
Council for Exceptional Children National Convention
American Association for Mental Deficiency National Convention
National Association for Retarded Children National Convention
University of Oregon Research & Training Center Workshops
California State College Rehabilitation Symposium
Abilene, Texas, school program for the educable retarded
Austin, Texas, school program for the educable retarded

Members of the project staff attended statewide meetings concerned with rehabilitation and have participated with a number of interested groups including the newly formed Governor's Committee of Vocational Rehabilitation.

The overall participation has given this project a perspective elicited from the State Department of Education, the Vocational Rehabilitation Administration, school district and university personnel, association representatives, field workers, and a host of persons directly related to rehabilitation concerns for the retarded. When this information was gathered and coupled with what is known about a local organization, such as the Portland School District, some general impressions were made and related to the following discussions.

Communications - The processes of DVR are foreign to many school districts, as are special education programs to DVR. There appears to be a communication gap among several agencies. For many school districts, there is concern in regard to "what is happening to a client" after he is referred to DVR. This problem was made known from several sources and is a genuine concern to both parties, such as a school district and DVR.

It was noted that where close harmony existed between DVR and another agency such as a school district, the physical offices were together or in close proximity. Advantages of this arrangement included the opportunity for frequent verbal interchange among DVR counselors and school coordinators and easy access to school records. Information could then be given teachers through the school coordinator--a routine matter in relation to the overall pattern of their work. This communication was supplemented by visits, meetings, and orientations throughout the school year.

Disadvantages were that the DVR counselors were away from their central offices which made some communication difficult. The trend with DVR, however, has been away from centralization in school-DVR programs. While more costly, perhaps, it is felt an advantage is gained by "being on the scene."

Operational - DVR, in Oregon, has experienced rapid growth in the last decade. Programs for the mentally retarded are comparatively new with the department and reflect much of the new emphasis of recent times. The "rehabilitation plan" is the basic DVR system used in working with clients and is similar throughout the nation with some minor local variances. The "plan" system with this project is supported by this district because it appears well organized, pertinent, and has the advantage of focusing attention on the client while keeping a well-ordered record as to plans and direction of the individual. The work-experience phase of the school program may benefit by such a process. There are, however, some concerns that might be stated.

Statewide and nationwide there was a tendency to judge client development by movement, and this notion is reinforced by the easy application of statistics. While it is recognized that few handicapping conditions present an ordered pattern of rehabilitation, it seems inappropriate to estimate program value in terms of specific movement and category without some kind of explanatory description. The very nature of retardation dictates rather unique processes with regard to work potential and rehabilitative efforts, and may not be in accord with past established documentation or evaluation--a factor also noted in the Minneapolis Vocational Project (1965, p. 127).

As noted in Question Three (and Table XII), many efforts in behalf of a client received little recognition other than a categorical "non-rehabilitated." However, several things that happened did result in an appropriate situation for many clients. Because these efforts could not be easily verified and documented counselors and DVR would not receive as much credit as they should. Even where verification was quite possible, the time and effort, and in some cases, costs, did not seem particularily worthwhile.

Also, the "movement" concern is rather unique with the retarded client. Table V, for instance, suggests the typical client may need long rehabilitation efforts, a fact which will not produce rapid movement. If early referral from schools becomes necessary, or desirable (See Table III), this will tend to increase the "time" factor. The reporting and documentation procedures should make ample allowances for the tendencies of educable retarded clients who require increased time and services regardless of a specific category.

Organizational - While several of the above points may allude to organizational problems as well as operational, some specific organizational characteristics need to be noted. Most would agree the two factors are difficult to separate.

Many school district-DVR programs will be continuing in "third party" agreement. Funds, in this case, will be handled through DVR as specified in PL 89-333. This kind of funding has proved successful in several areas of Oregon as well as the nation. One innovation, within possible school-DVR agreements, seems to be worth noting--that of a coordinating committee.

The Eastmont (East Multnomah County, Oregon) Project has pioneered a committee arrangement that consists of school and DVR personnel who act as a "board" for the total project. While the participating members of the coordination committee are selected by their respective agencies, they function together in the selection of personnel and assist in the resolution of problems which may arise in the operation of the program. This structure has the advantage of keeping the lines of communication open and makes possible many agreements not otherwise possible.

The referral system was discussed in Part II of this guide and described as one in which referrals would come to the project from teachers and school work counselors. It would seem that referrals need more involvement by the project staff if greater vocational potentials are to be realized.

If staffings could be made of entire classes with the teacher, school work coordinator, and the DVR counselors early in the school year, "plans" and "directions" could be made that would benefit students on a longitudinal basis. For instance, work experiences might be carried over through summer months and, once agreements are made, a cooperative plan would be fixed by those most directly involved in the vocational effort and communicative efforts would be more direct.

In all, many characteristics of one agency or the other need to be investigated with regard to communication and rapport building. For instance, authorization of funds, work schedules, vacation times, billings, etc. will need clarification if any program of this nature is to be carried on smoothly. It is evident that perceptive and knowledgeable personnel in the last analysis was the most crucial factor of a rehabilitation program such as Project 1681.

Personnel - This project, particularly in its beginning, had difficulty in finding rehabilitation counselors to serve this program. Salary, time, and qualifications all had influence on this problem. The Portland School District and DVR have insisted upon college graduates for rehabilitation work, preferably with some background in retardation for this program. Since one of the limiting handicaps in rehabilitation is retardation, it is hoped that universities will provide, or continue to provide, work in this area. Conversely, school personnel working in vocational areas with the retarded, such as coordinators, should have some knowledge of vocational and/or rehabilitation information. Such a combination could help the total program immeasurably.

Rehabilitation personnel are usually well versed in evaluation techniques, although some problem exists in interpretation of "aptitude" tests, especially where a re-testing situation exists, and the differences found between the WISC and WAIS intelligence scores. Evaluative information can come to the counselor from various sources and is put to use in working with the client. A problem exists, however, in that little time could be spent in giving or putting work evaluation into the teacher's hands. In some respects, the DVR counselor could be of more service if he were allowed, by time, to interpret and reinforce vocational evaluative information where it might be used most appropriately; either in the classroom or training station.

Summary

Previous questions have, in part, discussed the work of the vocational rehabilitation counselor. Additional information was gathered from other described sources. Together, a listing of evaluative characteristics seem to emerge in this environmental setting. The following will be discussed later with other information in the Recommendation Section.

(1) Some guidelines have been made within the area (Oregon) and framework of school-DVR programs for which the rehabilitation counselor will have a prime responsibility for interpretation and function.

(2) Guidelines and operation will be variable depending upon the environmental setting, and DVR (and DVR counselors) and school districts (and staff) will need to modify some of the characteristics of their agencies.

(3) The work of the DVR counselor is facilitated by close proximity to his client's records and sources of information.

(4) Close proximity of dual agency rehabilitation programs increases communications.

(5) The DVR counselor can close the communication "gap" by assuming a leadership role in vocational concerns for the retarded, and the school district should provide for this kind of opportunity.

(6) For a rehabilitation program to function, each agency may need to modify areas of its organization in order that the program can function better.

(7) Agencies dealing with mental retardation must continually reassess evaluative procedures in rehabilitation efforts which might affect the working environment of counselors and those concerned with vocational programs.

(8) School districts need to continually evaluate counseling techniques in vocational programs for the retarded.

(9) New and innovative means will be needed to help clients of poor vocational potential.

(10) A coordinating committee can help make the functioning between two agencies operate more smoothly.

(11) School counselors and DVR counselors need a strong orientation in the areas of the retarded and vocational characteristics as they might relate to them.

(9) What were the characteristics of the client samples?

The characteristics of the client referrals to Project 1681 have been reported elsewhere in some respects. Table IX, for example, suggested many instances in which socially oriented problems might be found. Also, the discussion in Question Five indicated the possibility of medical problems for many of the clients. In Question Nine, however, an attempt was made to indicate specific distinctions of clients in regard to several attributes. Such data could include many characteristics and many have been reported by other studies. It is true, however, that programs and environment seem to modify characteristics from place to place; therefore, the following information is felt to be pertinent to this study.

Identifying data was taken from the intake information on each client. Each special education student in the school district has had a Weshsler Intelligence Scale for Children (WISC) administered by a school psychometrist. Each test was reviewed by the Psychology Department head, a psychologist at Ph.D. level. Individual cases were periodically reviewed and/or retested throughout the school years. Confidence was placed in this information.

Table XXI - WISC I.Q. Information for Project Clients

		MEANS		
WISC		Female	Male	Totals
FS		69.8	66.6	68.1
VS		69.8	68.2	69.0
PS		73.5	71.6	72.6
N	=	88	95	183

The information from Table XXI was further divided. Table XI showed 69 client cases closed as rehabilitated and 66 cases not rehabilitated. The I.Q. scores of these persons were examined.

Table XXII - Comparison of WISC I.Q. Scores of Rehabilitated and Non-Rehabilitated Closed Cases

WISC	MEANS Male		Female		Totals	
	R.	NR	R.	NR	R.	NR
FS	69.9	65.0	67.5	69.0	69.0	67.4
VS	70.5	68.1	70.5	67.6	70.5	67.8
PS	75.1	68.8	77.1	71.7	75.8	70.0
N	33	31	20	34	53	65

Excluded in the above figures of the rehabilitated group are fifteen sheltered workshop employees. The workshop employees had respective WISC I.Q. scores of Full Scale = 58.9, Verbal Scale = 63.4, and Performance Scale = 64.8.

The mean differences between Totals of Rehabilitated and Non-Rehabilitated groups in Table XXII were statistically significant for VS and PS on a standard t- test at the .01 level (Garrett, 1965, pp. 213-216). It may be that the lower functioning level diminishes the chances to relate to work situations, or training in community situations. If this factor is compounded by social and/or aptitude problems, it may mean a longer time period to relate a higher vocational maturity. The significance, however, has small practical value.

Of the first 183 clients in Project 1681, 31.1% had birthplaces other than the state of Oregon. The approximate figures for the whole school district were not available; however, the percentage does seem high. It does suggest a type of mobility has taken place with a number of the client population. No estimate was made of length of time within the school district area, however.

Information on 171 clients, who had siblings in the family, and on whom data was available, indicates 53.8% were either first or last born. No data was available, however, if other retardates were members of the family. Approximately 40.7% of the clients did not have both parents in the family, suggesting incidents of divorce, death, and parental movement.

In an effort to further evaluate the clients, a practice was set up by the DVR counselors in which Youth Opportunity Commission, a division of the U.S. Employment Service, was utilized. The YOC administered the General Aptitude Test Battery (GATB) to most of the project's clients, and others which were requested by teachers. GATB scores purported to give estimates of "work aptitudes" and were developed by the U.S. Department of Labor for counseling and guidance in employment matters (Cronbach, 1960).

Many project clients that were referred to Goodwill Industries for evaluation were also given test batteries. These batteries included the MacQuarrie Test of Mechanical Abilities, Crawford Dexterity Test, Minnesota Clerical, Minnesota Paper Form Board, and Purdue Pegboard. Each of these tests purported to measure some relationship to vocational potential.

In all cases, with the above mentioned tests, the means of client samples and/or district EMR student samples indicated a statistical significance of low performance (as measured by chi-square, Garrett, 1964, pp. 253-265). If it can be assumed the reliability of these measurements were sufficient for EMR samples, the results suggest an important deficiency in motor performance and perceptual abilities of clients so tested; however, there is reason to suspect the confidence that might be placed in some of these measurements and is further discussed in Question Ten.

In an effort to investigate the prevalence and degree of "aptitude" deficits, an examination was undertaken into the performance-perceptual characteristics of clients and EMR students in the district at selected levels. Only one test, of those mentioned, met the standards felt needed for confidence--the GATB.

The MacQuarrie test correlates too closely to intelligence scores, especially subtests copying, blocks, and location. The tracing subtest, displays difficulty in scoring and tests of homogeneity are significant (Plue, 1967). The MacQuarrie, Minnesota Clerical test, and others mentioned were selected in the GATB development and were included, but modified, as a factor in work aptitudes. The available GATB scores of clients are shown in Table XXIII and lists the means of those who were grouped as rehabilitated and those who were not. The table is in terms of standard scores with a norm of 100, SD of 20, and a chronological age mean of 18.78 years. Incomplete GATB scores were available for 55 closed cases.

Table XXIII - GATB Mean Scores of Project 1681 Sample

		G	V	N	S	Q	P	K	F	M
Rehab.	N	27	25	25	25	25	25	28	28	28
	M	72.44	74.96	71.68	82.04	92.40	91.40	93.42	85.46	96.92
Non-Rehab.	N	27	19	19	22	21	22	27	27	27
	M	63.44	73.21	69.89	74.90	86.04	81.72	79.62	72.77	78.33
Totals	N	54	44	44	47	46	47	55	55	55
	M	70.44	74.20	70.91	78.70	89.50	86.87	86.65	79.24	87.80
Range for totals		55-87	61-90	48-100	58-104	59-115	48-127	31-132	1-140	5-146

The GATB scores in Table XXIII indicate a generally low functioning in all areas, but a large variance of scores. This agrees with other studies using the GATB on retarded samples, notably Tizard (1950). The G, V, N, and S scores might be as expected considering the relatively high correlation of thses scores with intelligence. The P (form perception), Q (clerical perception), K (motor speed and coordination), F (finger dexterity), and M (manual dexterity) could be areas of functioning where agencies working toward vocational potential might be concerned.

It should be noted that mean differences are shown in Table XXIII between the rehabilitated and non-rehabilitated groups. These differences were statistically significant at the .01 level (Tate, 1955, p. 433) for subtests scores S, P, Q, K, F, and M. This information suggests a validity for the measurement; however, the numbers are too small to place full confidence in the results. Using the same sample of N = 55, however, a determination can be made of successful GATB scores, where "successful" is determined by achieving at least one Occupational Aptitude Pattern (GATB Manual, 1965) against rehabilitated and non-rehabilitated clients. The results of this tabulation were similar to Table XXIII.

Table XXIV - Comparison of Rehabilitated and Non-Rehabilitated Clients. GATB scores and Success in Employment

	GATB		Employment	
	Successful	Un-successful	Rehabilitated	Non-rehabilitated
Male	12	18	14	16
Female	11	14	14	11
Totals	23	32	28	27

The possibility of the GATB, with EMR sample, should receive more study in the field of prediction and validity. It would seem the data of this sample, while tenuous, could give some confidence in the GATB use.

In an effort to explain the prevalence of the apparent performance deficit, and to investigate the nature of this deficit, a large study was made of the ninth and tenth grade EMR students of the school district using the GATB subtests of P, Q, K, F, and M as criterion measures. The classes were divided into three groups, randomly assigned and controlled for similarity (no vision difficulty or physical disability of upper extremities). The division gave numbers of 206 with groupings of A = 67, B = 66, and C = 73. WISC I.Q.'s of FS, PS, and VS, and chronological age data gave no statistically significant differences below the .10 level (Tate, 1955, pp. 298-302 and Garrett, 1958, p. 225) among groups. Tests of homogeneity were non-significant (Tate, 1955, p. 501). In terms of raw scores, the results of these measurements are shown in Table XXV. The subjects had a mean age of 15.7 years.

Table XXV - GATB Scores of 206 Ninth and Tenth
Grade EMR Students

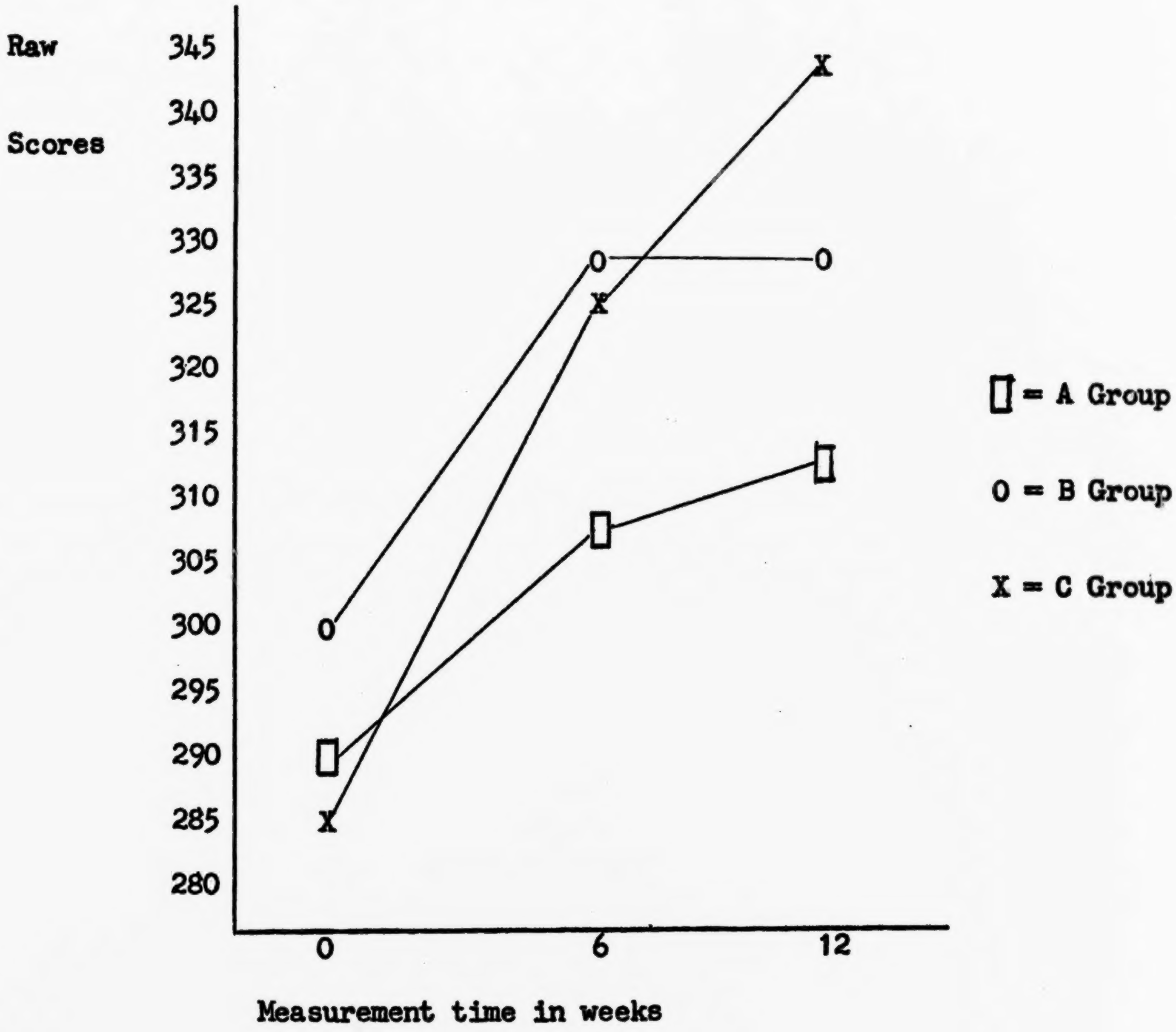
	GATB Raw Score Means					
N - Group	K	Q	P	F	M	Totals
67 - A	52.00	24.70	35.21	36.99	142.34	291.25
66 - B	54.77	23.21	34.88	37.09	149.03	298.98
73 - C	51.77	22.60	34.32	35.55	141.37	285.60
Total Means	52.81	23.48	34.78	36.51	144.14	291.73
SD	10.79	7.95	11.80	10.10	21.38	46.89
Interpolated raw score norms	69.58	40.08	58.92	54.41	171.81	375.32

Table XXV data indicates the sample means were at least one standard deviation below the norms for each subtest. Evidently the deficit is prevalent in the younger years, generally, and is not overcome by maturation; however, aging appears to have some effect.

In order to determine if it was possible to overcome the apparent deficit in the N = 206 population, a series of manipulative exercises were given to selected groups for different time periods. Group A was controlled for twelve weeks, Group B was treated for six weeks and controlled for six weeks, and Group C treated for twelve weeks. The treatments consisted of sorting, placing, matching, and manipulative activities for an average of forty-two minutes daily. The three groups were analyzed by covariance (Garrett, 1958, pp. 295-303) and several significant findings were made with regard to the work aptitude performance characteristics using the GATB as criterion measures (Plue, 1967).

While a "practice effect" was noted, the treatment scores developed far beyond this aspect. The practice effect was most noticable in the M subtest. The score totals indicated a relationship between treatments and criterion measures.

Figure Six - Comparison of Groups A-B-C Adjustment Means to Total GATB (P, Q, K, F, M) Measurements



According to Figure Six, the longer the treatments were in force (Group C) a significant different in criterion measure was found. After treatments were made (Group B), the subjects gave evidence of retaining some portions of the treatment effects. A "practice" effect was noticed (Group A) but tended to "flatten" out after a period of time and this factor was consistent with other preliminary findings. (U.S. Department of Labor, Occupation Test Manual, July-December, 1966, p. 29)

Retest reliabilities ranged from .86 to .94 and split half reliabilities, where appropriate (Q), ranged from .95 to .96, but may have been spuriously high because of the speeded factor in the subtest Q. Measures of homogeneity, sex difference, age differences, and standard error resulted in no statistical significant differences or findings. Further, GATB scores on other similar groups resulted in similar initial raw scores.

In a breakdown of the total scores, it was determined the activity areas of speed, coordination, and dexterities (K, F, M) tend to be retained at least six weeks (a limitation of this analysis) and that form and clerical perceptual areas (P. Q) need to be time reinforced or gains made tend to regress toward individual means. In all, the study suggests work of a remedial nature can be effective in many motor performance areas. The implications for curricula work are obvious.

Each year the school district gives achievement tests in special education classes and this information was collected for each client in his graduating year. Information was available for 109 clients.

Table XXVI - Achievement Means of Clients at the Time of Their Senior Year

Reading Level	Math. Level	Language Level	Total Achievement
5.41	5.57	5.31	5.45

N = 109 (Based on California Achievement Test - Elementary Form Y)

It was not considered pertinent to compare these scores against others. The data, however, have an obvious relation to vocational potential and help to describe the client. They also help to focus on the national concern of placing the retarded in vocational situations. As measured by the above table, the project might expect an approximate fifth grade academic level of its referrals in reading, mathematics, and language.

Other kinds of objective measures were difficult to administer. There appears little that this project could use with any degree of confidence in the nature of objective testings in the social-emotional areas. There was, however, some observational information available.

While in school, observations were made of clients as to their "attitude" toward school. This took the form of recorded writing in year-end reports for all students in special classes. Also, written information of a like nature was made of each person's "attitude" as a client of this project toward vocational training and/or work. While this information may be subjective judgments, it represents the observation of trained personnel and may be thought of as a type of client "nature."

If "attitude" is defined as a behavior toward environment in that it displays a manner of acting, feeling, or thinking that shows one's disposition, a tabulation can be made of "attitude" estimates. The results of such estimates are shown in Table XXVII. Phi coefficients (Garrett, 1958, pp. 388-391) for (1) Rehabilitated clients were

Table XXVII - Estimates of Client's "Attitudes"

	In School		As Project Client		
	Good	Poor	Good	Poor	N
	1 - Rehabilitated Clients (Closed)				
Male	20	13	28	5	33
Female	16	9	22	3	25
	2 - Non-rehabilitated Clients (Closed)				
Male	8	14	9	13	22
Female	16	17	18	15	33

estimated at r = .276, while (2) Non-rehabilitated clients were estimated at r = .0546. When Table XXVII is reviewed, this data tentatively suggests "attitude" in school is likely to carry over into the vocational program and gives a slight indication that some clients, particularly the rehabilitated group, tend to have more favorable "attitudes" toward work situations. This data, however, may be quite limited.

Summary

To help summarize the concerns of Question Nine, information was utilized from previous data. Tables XXI to XXVII and Figure Six helped localize specific characteristics that were felt to be pertinent. The following list was considered:

(1) WISC I.Q. information for clients appeared similar to that of special education students of the district.

(2) With this sample, a statistical difference was suggested between Rehabilitated and Non-rehabilitated clients in WISC I.Q.'s.

(3) Rehabilitated clients had generally higher WISC I.Q.'s in verbal scores and performance scores, while, as a group, sheltered workshop employees had much lower I.Q. scores.

(4) Approximately 30% of the project clients had birthplaces outside of Oregon.

(5) Approximately 50% of the project clients were first or last born in their respective families.

(6) Approximately 40% of the project clients did not have both natural parents in their family.

(7) Many aptitude and vocational tests appear inappropriate for use in retarded samples.

(8) The General Aptitude Test Battery, in general, gives indication of being an appropriate instrument for measurement of basic work aptitudes in this retarded sample.

(9) As measured by the GATB, the client and selected samples were deficient in defining motor and perceptual work aptitudes.

(10) There are indications that some work aptitudes may be remediated to provide better functioning.

(11) The project clients usually attain an academic achievement level of approximately 5.5.

(12) There appears to be a close relation to "attitudes" in school and success in vocational situations.

(10) What does the Goodwill laboratory evaluation tell us about a client that cannot be determined by the school?

As mentioned in Part I, Goodwill Industries received a companion project, RD-1736, that worked in conjunction with the present project. RD-1736 established an evaluation unit and training situations (work adjustment training "WAT" and on-the-job training "OJT") for use of clients in this project. The Final Report (1968) is available and was used for informational purposes in discussing the above question.

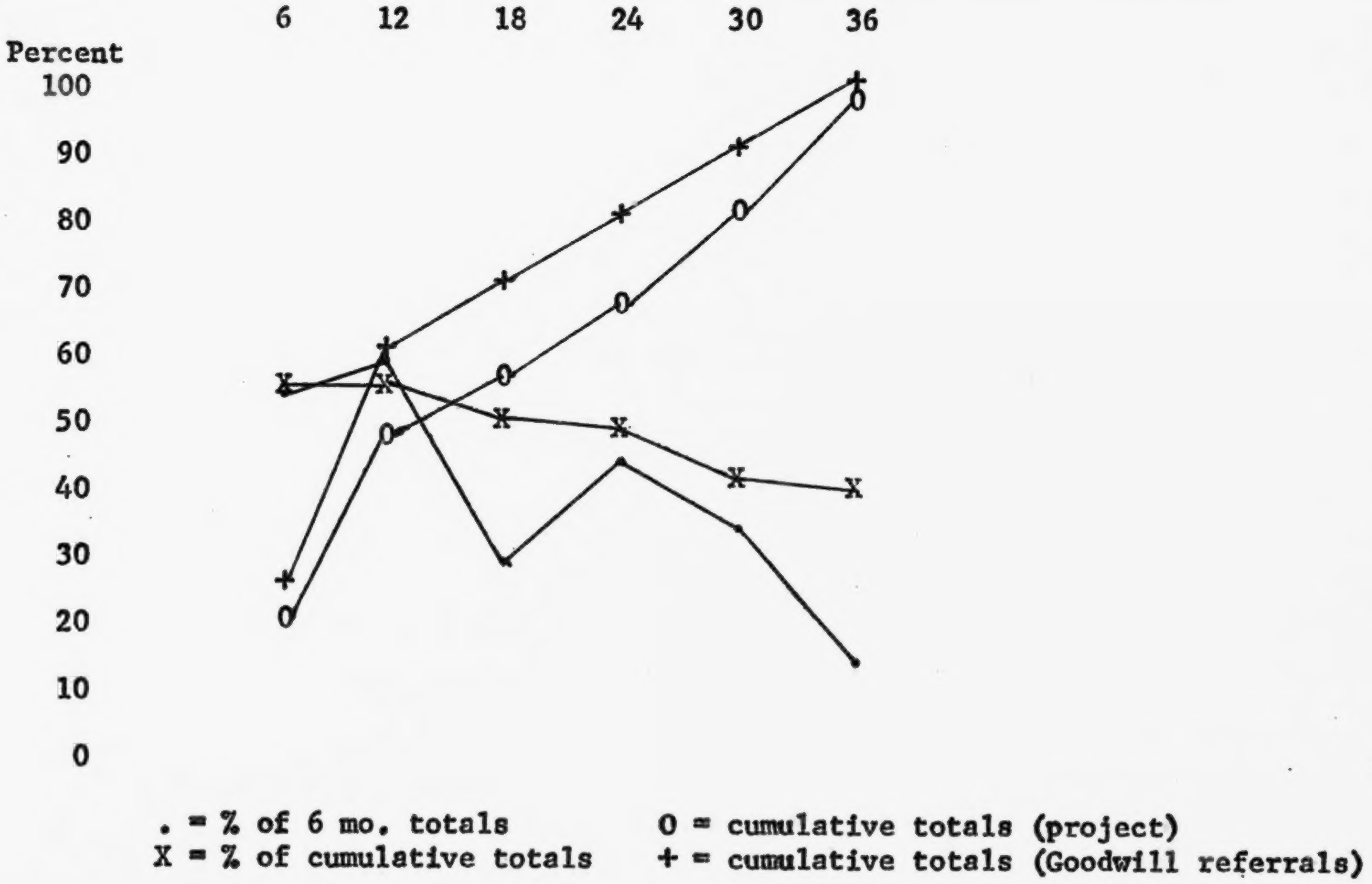
A paramount consideration of the present project concerned itself with the development of "realistic pre-work evaluation of a large number of handicapped students." This consideration was felt pertinent to the vocational well-being of the school district EMR population.

Because of the nature of the Portland School District's Special Education program, described in Part I with emphasis on the work-experience program, it was estimated about 50% of the clients referred to this project would be evaluated and/or receive further training at Goodwill Industries. RD-1736 (1968, pp. 24-30) reports 78 clients were referred, or 46%. This project concurs with those figures, except that since the time of issue, three new clients were referred, or 43.3% of the totals (N = 187) from Table XI. For the sake of clarity, however, the N = 78, as reported in RD-1736, will be used as the representative sample for informational and comparative purposes.

As indicated in RD-1736 (1968, pp. 7-9), the present project referred clients to Goodwill Industries for evaluation. In some cases, training was the main interest, but the vast majority of initial referrals were for the purpose of evaluation. The number of referrals fluctuated throughout the course of this demonstration.

Figure Seven - Number of Referrals to Goodwill Evaluation
at Six Month Intervals

	@6mo.	12 mo.	18 mo.	24 mo.	30 mo.	36 mo.
Number of Goodwill referrals	22	27	7	7	10	5 = 78
% of Project totals for 6 mo. period	55.0	58.7	29.2	43.7	34.5	5.6
Clients accepted during 6 mo. period	40	46	24	16	29	32 = 187
% of cumulative totals for Project	21.4	45.7	58.8	67.4	82.8	100



The trend shown in Figure Seven indicates a declining percentage of referrals from the beginning time of this project. Several reasons might be suggested for this decline, but most important were costs and amounts of time involved. There is no question in the minds of this project's staff of the potential value of Goodwill's evaluation unit and/or training stations as described in RD-1736 (1968).

For case service funds, this project received a yearly amount totaling $36,000 for the 1967-68 fiscal year. From this money, the project financed medical examinations, some psychological therapies, evaluative programs (to RD-1736), training programs, and many other situations that might benefit the client vocationally. The present cost of maintaining a client at Goodwill Industries, Inc., is $9.00 per day, $45.00 per week, or approximately $200.00 a month. If an evaluation of eight weeks is needed, followed by Work Adjustment Training or On-the-Job Training, which averages nineteen weeks (RD-1736, 1968, p. 35) for W.A.T., a simple projection would establish that thirty such clients in a year's time would be more than this project could appropriately handle under existing conditions. This could suggest a need for more case service funds, or a reorganization of evaluative training units. As of the present date, March 20, 1968, this project sponsors one client at a Goodwill Training Unit. There are several modifying factors that need to be considered in the overall picture of the intra-agency use. Time and costs are but two. The kind of client, value received, development of potentials, and other characteristics need considerations and further study.

Some identifying characteristics may be pertinent to the referrals to Goodwill. For comparative purposes, data was taken from information previously reported and from RD-1736 (1968, p. 24).

Table XXVIII - Comparison of Goodwill Referrals to Project Totals in WISC IQ Scores

	WISC		
	Verbal	Performance	Full Scale
Goodwill Evaluees (N = 78)	68.99	69.51	66.39
Other clients (N = 105)	70.7	73.4	68.9
Project 1681 Totals (N = 183)	69.0	72.6	68.1

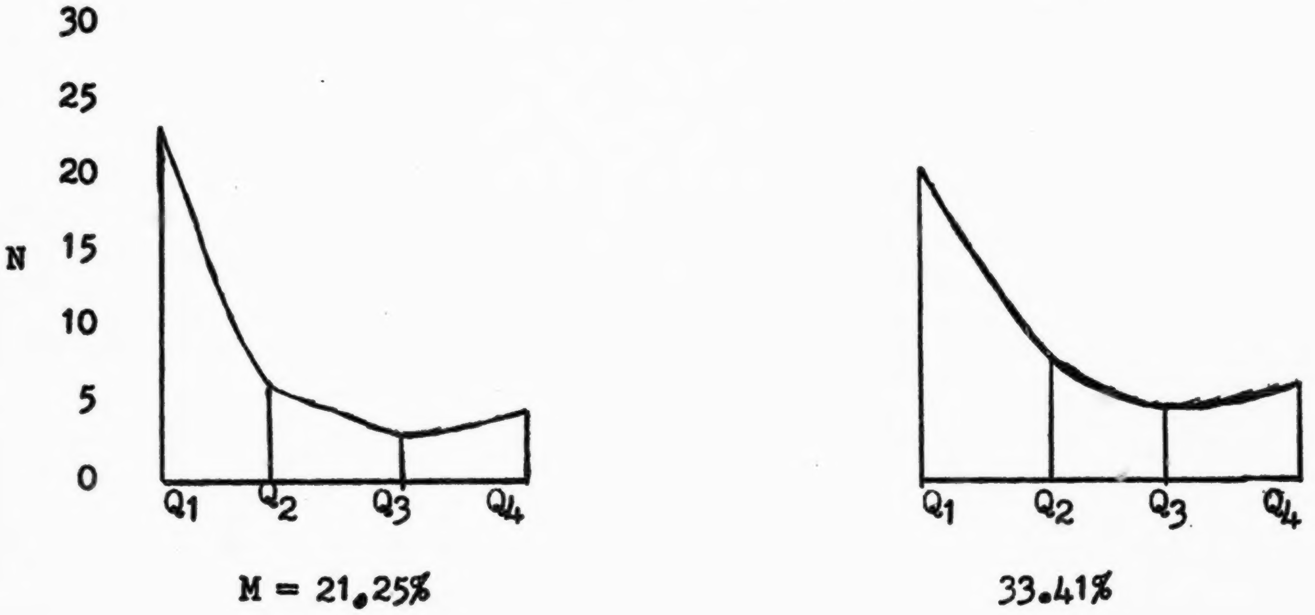
Table XXVIII indicates those referred to Goodwill had WISC IQ scores that were somewhat lower than those that were not referred. The largest difference was in WISC Performance Scale scores of 3.9 WISC IQ points. The referrals, if compared to those figures in Table XXII, will display greater differences in PS scores. The differences are rather small to attach meaning on individual cases. We cannot say, for instance, a PS score of 72 will be a success and a score of 68 will not. If, however, lower scores reflect a deficit in "aptitudes" and/or social progress, more could be made of this factor. The correlation between these scores and "aptitudes" have been reported as low, but positive (see Question Nine). The relationship is still in the research stage.

Extracted from Tables VI and X were estimates of vocational ratings and socioeconomic statuses of Goodwill referrals. Sixty-one Goodwill referrals, rated in Table VI, were estimated to have a good vocational prognosis. This figure represents 11% of the totals rated. Thirty-five clients had a fair estimated prognosis, or 40% of the totals rated, while seventeen clients had a poor estimated prognosis, or 65% of the totals rated in this category. Of 75 Goodwill referrals rated High, Middle, or Low, as in Table X, 3 = High, 44 = Middle, and 28 = Low ratings. These figures compare similarly to the totals of the general client population as reported in Table X.

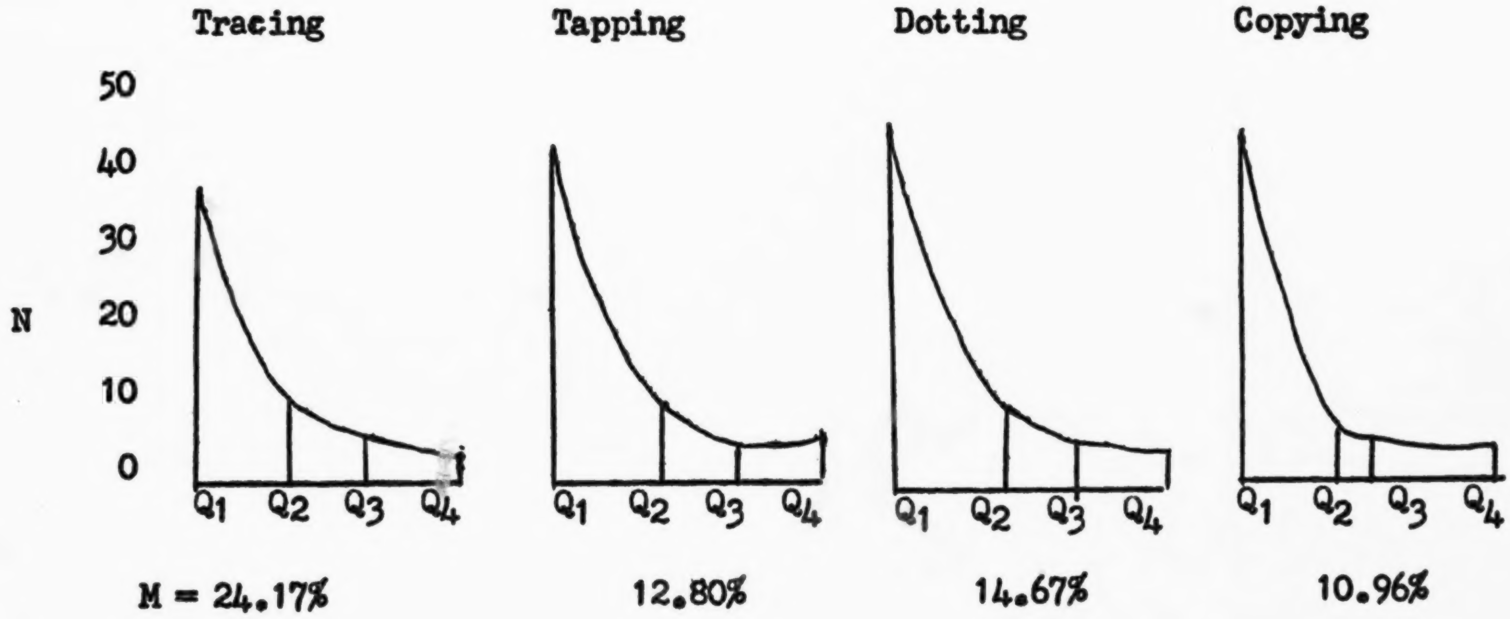
The evaluation unit of RD-1736 was divided into two divisions--prevocational and job evaluation tryouts. This project concurs with PR 1736 (1968, p. 39) that many standardized tests are valueless with the EMR of this sample. Resulting scores hardly meet the assumptions of homogeneity of homoscedisticity with this EMR sample. It would be difficult to interpret the meaning of scores, except to say, when compared to norms, these clients were low as the following diagrams indicate.

Figure Eight - Diagrams of Various Test Results Given to Goodwill Evaluees in Numbers in Four Quartiles

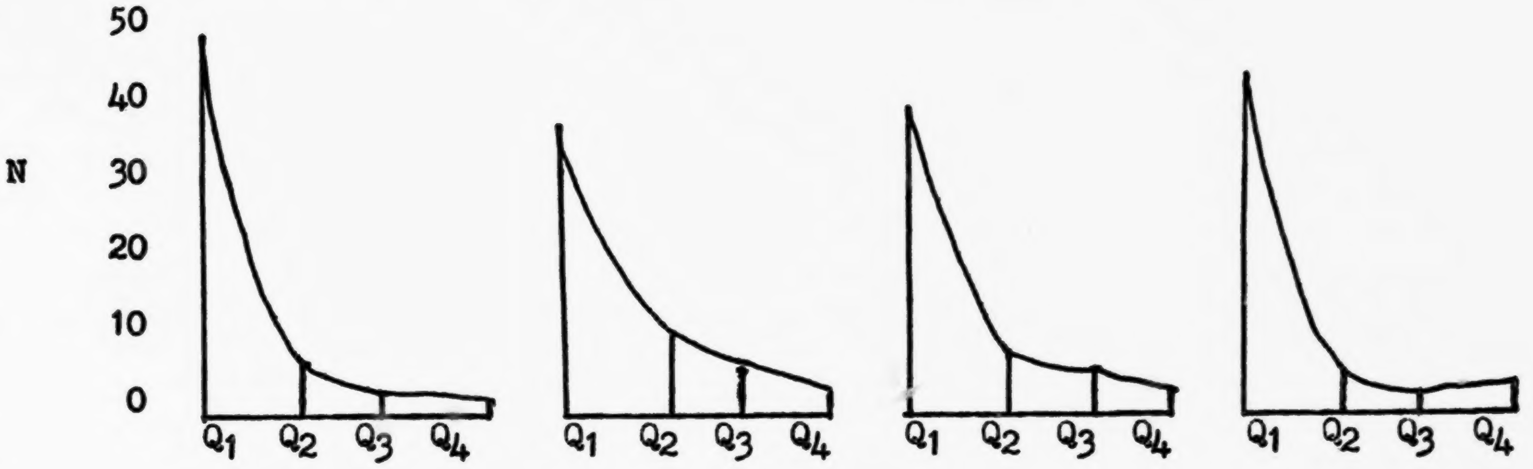
Crawford Small Parts Dexterity Test



MacQuarrie Test for Mechanical Abilities
N = 51



Location Blocks Pursuit Totals



M = 7.11% 15.05% 16.11% 11.05%

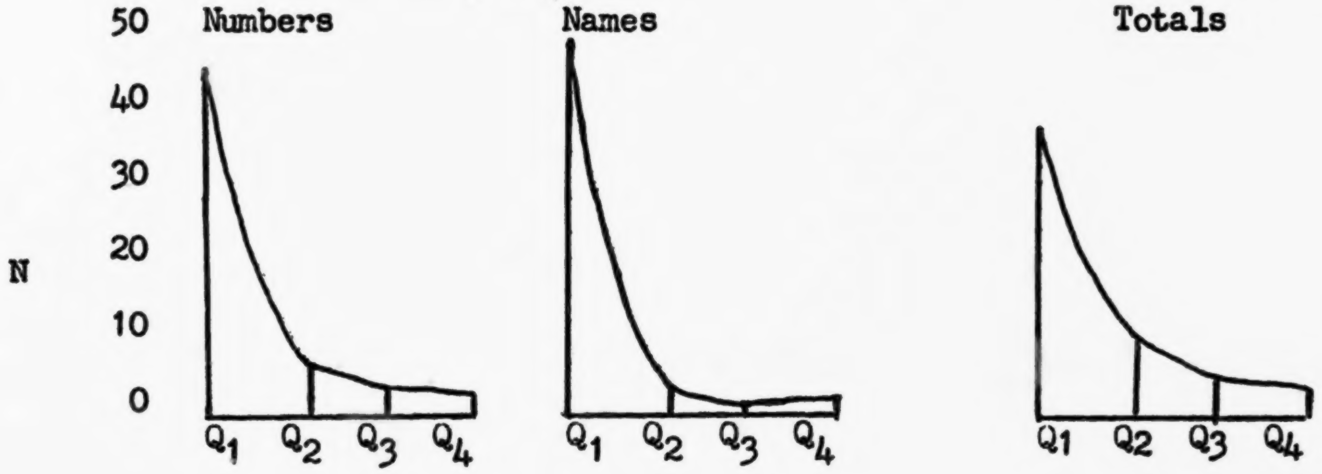
Minnesota Clerical

N = 49

Minnesota Paper From Board

N = 50

Numbers Names Totals

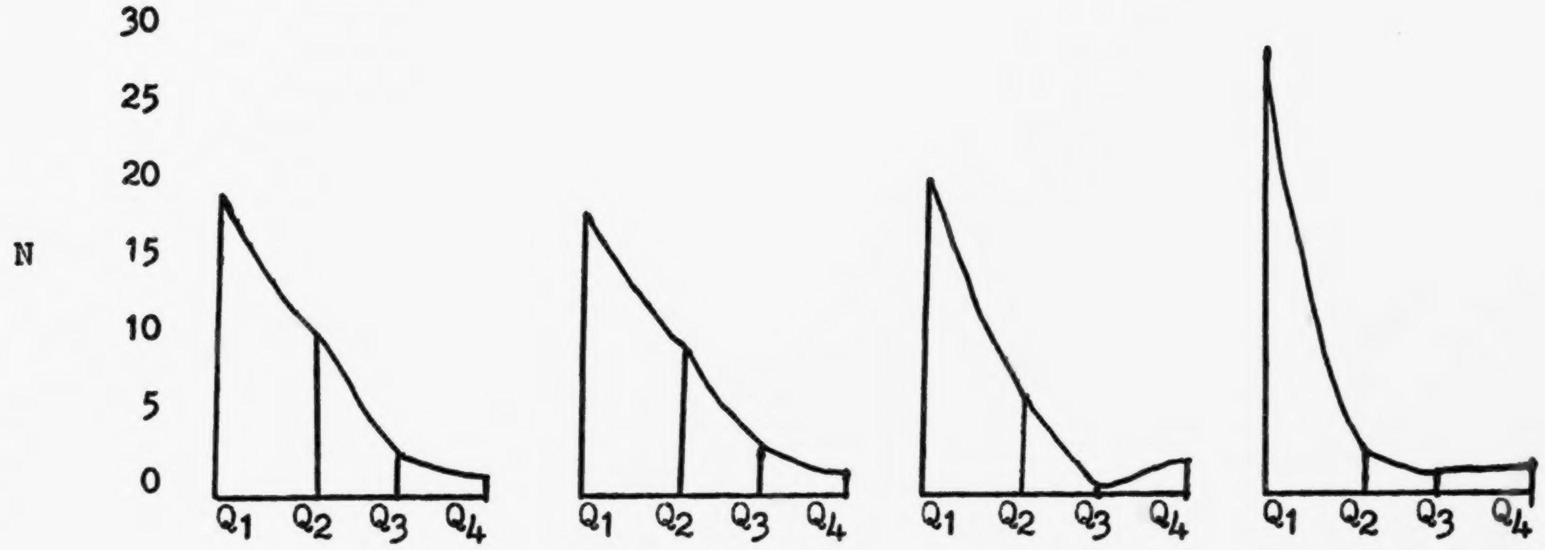


M = 9.06% 5.53% M = 17.68%

Purdue Pegboard

N = 32

Right Left Both Assembly



M = 18.56% 26.81% 19.62% 11.37%

A chi-square (corrected by N/100 for $X^2\%$, Garrett, 1960, p. 262) was made on each of the above to test the divergence of observed results from those expected on the hypothesis of a normal distribution. As might be expected, all tests were statistically significant beyond the .01 level, which confirms the samples tested were deficient in many work aptitudes if the test criteria are valid estimates. Each of the above has reliability and correlation problems with mentally retarded samples (Super, 1949, Anastasi, 1957, Cronbach, 1960). A more fruitful approach to the aptitude test performance estimate would seem to come from the use of the aforementioned GATB (see Question Nine).

In the prevocational unit of the evaluation laboratory, some success was evidenced through the development of work sample tasks that simulated actual work required on various jobs. Accordingly, greater reliance was placed on these tasks to make evaluations (RD-1736, 1968, p. 40). A problem existed, however, in that these tasks, at present, do not present a clear-cut meaning for vocational planning. We would not know, for instance, whether a rating of "poor" in Mail Sorting is a function of achievement (reading), dexterity, perception, intelligence, or combination of these, or for that matter some other force. As demonstrated in another program (Plue, 1967), it may be that "work-task" activity might be more valuable as a curriculum tool than a diagnostic one. At any rate, the whole area appears to be one in which more research needs to be made.

The latter part of the evaluation unit at Goodwill, consisted of on-the-job tryouts, in several shops, usually, of one week duration. Interspersed with this work evaluation were group counseling sessions throughout the time spent in this unit. Such counseling was also maintained in training areas of WAT and OJT. Periodic staffings were held among project counselors and the evaluation staff on each of the referred clients.

This type of evaluation, in various shops, seemed to have more value to this project than other kinds mentioned. As mentioned in RD-1736 (1968, pp. 14-15), communications tended to be more meaningful in staffing situations than when only narrative reports were made. The total vocational situation could be better brought into focus and plans could be made with more purpose behind them. Written narrative reports gave some added information that was useful.

From the standpoint of work-training-stations, data was collected to indicate the "kinds" of work training situations used of Goodwill client referrals. Of seventy-eight so-referred clients, it was found that most had more than one experience, but differences were noted in variety. Table XXIX indicates the placements of Goodwill referrals at various stages of their progress.

Table XXIX - Instances of Work Experiences at Various Levels for 78 Project Goodwill Referrals

A In-school Work Experience

1 - Cafeteria	75
2 - Office messenger	21
3 - Janitorial aide	18
4 - Teacher aide	13
5 - Library aide	7
6 - Laundry (PE)	6
7 - Gymnasium helper	4
8 - Woodshop helper	2
9 - Others	5
Total experiences	151
Mean	1.93

B Out-of-School Work Experience

1 - Dishwasher-busboy-waitress	32
2 - Nurses aide	23
3 - Janitorial aide	15
4 - Teacher's aide	13
5 - Office helper	9
6 - Dental assistant	5
7 - Laboratory assistant	4
8 - Hospital escort	4
9 - Laundry	2
10 - Others	7
Total experiences	114
Mean	1.46

C Goodwill Work/Training Experiences

1 - Cafeteria	27
2 - Contract shop	23
3 - Print shop	16
4 - Janitorial	14
5 - Woodworking	13
6 - Miscellaneous	13
7 - Sewing	12
8 - Shoe repair	11
9 - Metal shop	10
10 - Upholstery shop	10
11 - Laundry	9
12 - Small appliance repair	8
13 - Sales	7
14 - Materials handling	7

15 - Dock	5
16 - Others	33
Total experiences	218
Mean	2.79

The work experiences cannot be directly compared because at the school levels the experiences are for longer periods of time, and those at Goodwill were usually one-week tryouts. However, it is important to note the latter offered a greater variety of situations, and probably, carried more intensive supervision. Without doubt, the evaluation-training units had the advantage of experience variety. It is worthy to note, too, that cafeteria-food service experiences were utilized more than any other in all three situations. Of those referred to Goodwill, N = 78, many clients received food related experiences at three levels.

As previously reported, this project felt that the verbal communications in client staffings were the most beneficial kind for vocational planning, however, written reports were used to verify, consolidate, and communicate with others the general plan and direction for each client. As noted in Question One, this kind of information became part of each plan and was also used for reporting to teachers and school work coordinators. The question might be asked if these reports, the school's file, in which pertinent information is added to the project file, and those of RD-1736 added sufficiently to known information. Would this project gain from project RD-1736 evaluations?

To help estimate this concern, the project RD-1736 referral's school records (including school coordinator reports) and Goodwill evaluations were examined for content on fifteen characteristics. The results of this tabulation are shown in Table XXX.

Table XXX - Characteristics of Information Reported on 78 Goodwill Referrals from School Files and Goodwill Evaluations

	School Files		Goodwill Evaluations	
	Yes	No	Yes	No
Characteristic	(percentage of times reported)			
	%		%	
(1) A developmental history	66.7	33.3	0	100
(2) Psychological data	100	0	34.6	65.4
(3) Estimate of achievement	75.6	24.4	67.9	32.1
(4) Estimate of aptitudes	10.3	89.7	97.4	2.6
(5) Estimate of attitudes	96.1	3.9	96.1	3.9
(6) Estimate of work done	74.4	25.6	94.8	5.2
(7) Quality of work	23.1	76.9	96.1	3.9
(8) Quantity of work	8.9	91.1	93.6	6.4
(9) Endurance for work	29.5	70.5	75.6	24.4
(10) Attention span	55.1	44.9	78.2	21.8
(11) Following instructions	44.9	55.1	80.8	19.2
(12) Accuracy of work	30.8	69.2	79.5	20.5
(13) Distractibility	39.7	60.3	76.9	23.1
(14) Attention to supervision	53.8	46.2	82.1	17.9
(15) Motivation to work	30.8	69.2	78.2	21.8

Table XXX indicates several differences in the reporting of information. Two characteristics in school files are reported over 90%, while five characteristics are over 90% from RD-1736. This table suggests new information is gained from the evaluations. The results might also suggest the school records could be more informative.

If the recorded information is to be of value to those concerned with client overall work potential, some statements need to be made with regard to factors that might benefit the client and counselor alike. Reasonable assumptions are that value statements, aspects of the job, client interpersonnel relations, personal aspects related to the job, and recommendations could give information that would help in planning for vocational potential. In an effort to make an estimate of these factors in report writing of school and RD-1736 files, inspection was made of the reports of described evaluees, N = 78.

Table XXXI - Estimates of Several Factors Concerning 78 Goodwill Referrals from School and Goodwill Reports

	School		Goodwill	
	Yes	No	Yes	No
	(percent of time reported)			
(1) Statements of Value (Concerning work tryout and to S's potential)	84.62%	15.38%	94.11%	5.89%
(2) Aspects of Job Discussed (Concerning specifics of job that may or may not work well and why they did or did not.)	7.69%	92.31%	36.76%	63.24%
(3) Interpersonal Relations Discussed (Co-worker - supervisor relationships)	91.03%	8.97%	80.88%	19.12%
(4) Personal Aspects to Job Discussed. (Relationship of S to job and characteristics of his personality to it)	10.25%	89.75%	88.23%	11.77%
(5) Recommendations made	93.59%	6.31%	86.76%	13.24%

Table XXXI reveals several aspects of the evaluation that need explanation. It is surprising that value statements, #1, are made without the benefit of knowing, or suggesting the aspects of the job evaluated. The school evaluations appear particularly deficient in relating those specifics that clarify what "parts" of a job may be crucial, and a student's personal relationship to the work at hand. Little, seemingly, is said about the worker's motivation to the job.

The evaluations from Goodwill appear more complete, generally, but still are not ideal in furnishing the desired information. The data from Table XXXI suggest approximately 12% to 20%, or 10 to 15 clients, did not obtain the very factors from the evaluation that might be needed to plan vocationally.

Summary

Information gathered for Question Ten indicates the following:

(1) The evaluation unit was seen as potentially beneficial to help establish vocational plans.

(2) Most standard tests are invalid with this sample.

(3) The costs of evaluation and/or training are increasing.

(4) Goodwill represents the best available training work stations for many of the project referrals, and has a large variety of stations.

(5) More study is needed for the best use of work sample tasks.

(6) Communication reports of the school and the Goodwill training facility need to be specifically updated to included specifics of work stations.

(7) More attention needs to be paid to the specific aspects of work and the client's relation to it.

(8) An evaluation unit can service an important area of developing work potential.

(11) To what extent is the chronological age of a student a determining factor in work assignments?

Sometimes our expectations for the EMR student may not be appropriate to his capabilities. What is reasonable for the thirteen or fourteen year old EMR student? The sixteen or seventeen year old? General observation of work behavior has led the school to somewhat curtail the in-school phase of work experience during the freshman year and emphasize this more in the sophomore year. Of course, certain students at the freshman level are counseled in the in-school work experience program, but this tends to be an individual matter. The same consideration is made for juniors and seniors in the out-of-school work experience (pp. 6-7). A question might arise as to the maturity level for EMR students that might be in evidence with this project sample.

In an effort to investigate some of the various constructs related to some maturity characteristics, data was collected on WISC IQ scores, chronological ages, achievement records, social adjustment, and work station comparisons. This information consisted of test scores, previously described, and estimates made by teachers and counselors.

Of 135 closed project cases, a determination was made of chronological age to the nearest birthdate. The age was then compared to success and lack of success, based upon teacher and counselor judgments, to several kinds of work experience and employment. The numbers in each cell of Table XXXII might be different because all subjects did not necessarily participate in all areas or, in some instances, there was a lack of clear-cut information.

Table XXXII - Comparison of Ages of Closed Cases to Work Assignments

	In-School Work Exp.		Out-of-School Work Exp.		W.A.T. Goodwill		Project Employment	
Age (yr.)	S	U	S	U	S	U	S	U
20							5	
19			3		2		30	5
18	3		10	5	19	6	34	24
17	4	5	48	16	4	3		5
16	45	15	23	24				
15	29	18	2	3				
14	9	7						
	90	45	86	48	25	9	69	34

The age rates between the successful and unsuccessful appear to be more nearly equal at lower age categories in each division. The unsuccessful dominate at fifteen years of age or less on in-school work experience. This pattern typifies the results shown for out-of-school placements and initial employment. The unsuccessful in Project employment lists only those for whom follow-up information indicates a clearly cut unsuccessful case (see Table XII, p. 36).

The same type of analysis was made for other variables. The Full Scale WISC IQ scores achievement levels, and social adjustments were considered in terms of percentage of cases that were successful or unsuccessful in work assignments. In each case, the percentage represents the per cent of the total of that column.

Table XXXIII - Comparison of Closed Client Cases WISC IQ Full Scale Scores, Achievement Levels, and Social Adjustment Ratings to Work Assignments

	In-School Work Exp.		Out-of-School Work Exp.		Goodwill W.A.T.		Project Employment	
N =	90	45	86	48	25	9	69	34
	% S	% U	% S	% U	% S	% U	% S	% U
WISC FS								
70+	40.0	44.4	44.4	37.5	62.4	45.6	44.8	41.7
60 - 69	48.6	44.4	47.2	51.1	30.1	--	48.3	41.7
59-	11.4	11.2	8.4	11.4	7.5	54.4	7.9	16.6
Achievement								
7.0+	16.2	--	11.8	5.9	--	--	10.3	8.3
6.0-6.9	13.5	11.8	17.6	5.9	42.2	--	17.2	8.3
5.0-5.9	16.2	5.9	14.7	11.8	42.2	30.6	13.9	16.7
4.0-4.9	32.4	58.9	35.3	52.9	13.6	35.2	41.4	41.7
3.9-	21.7	23.4	20.6	23.4	--	34.2	17.2	25.0
Social Adjustment								
Good	39.9	--	40.0	--	18.8	--	37.9	16.7
Fair	44.4	31.3	51.4	18.8	43.8	42.9	44.8	25.0
Poor	16.7	68.7	8.6	81.2	37.4	57.1	17.3	58.3

(1) Work Exp. = Work Experience
(2) In terms of percent of column totals, to the nearest tenth.

According to WISC IQ data, it is apparent from Table XXXIII these scores do not determine success. The pattern in work assignments is similar throughout (the percentage differences for Goodwill WAT may be accounted for by small numbers) the various areas. No one group seems to do better or worse than the other.

The precise meaning of achievement scores is somewhat clouded. In percentages there appear to be more unsuccessful cases at the 4.0-4.9 level; however this achievement level has a higher percentage of the totals. If the achievement scores were a factor, one would expect the 3.9 level to indicate the same kind of pattern. It does not. The trend of these scores did not seem to differ between "S" and "U" categories consistently.

The social adjustment information suggested a pattern in contrast to the others of Table XXXIII. If a client is judged to have a good, or even fair, social adjustment, his chances for success in work assignments are apparently quite good. In percentages of all categories, the unsuccessful displayed a tendency to have poor social patterns.

It would seem, then, two characteristics, age and social adjustment, have some bearing on work assignments. If the subjects, in age and social consciousness, are more mature, the chances for success in work assignments seem to be higher. A simple listing of the two variables, however, does not answer a complex problem. It does suggest, however, that agencies should be wary of some early work assignments and stronger efforts may be needed to overcome poor social adjustments.

Project records were reviewed to determine what changes were in evidence that seemed to make the client more employable. The clients, in this case, are those who are employed whether listed as rehabilitated or not (see Table XIII). Many factors seem to imply a type of maturity as evidenced by the "instances" listed in Table XXXIV.

Table XXXIV - Instances of Changes in Any Aspect that Made a Project Client More Employable or Less Employable

More Employable	Instances
(1) specific training	13
(2) able to better understand surroundings	8
(3) better understanding of work	7
(4) paid better attention	4
(5) less hyperactivity	2
(6) more stability	2
(7) medical control	2
(8) more confidence in ability	2
(9) change in appearance (includes diet)	2
(10) better employer relationship	1
(11) better parent support	1
(12) more able to communicate with others	1
(13) learned the nature of client's abilities	1
	N = 46
Less Employable	
(1) family overprotective	8
(2) family would consider only one job	8
(3) negative response to other people	7
(4) family moved out of state	3
(5) negative response to minor reprimand	3
(6) quit training to protect marriage (client felt)	2
(7) psychotic	2
(8) poor motivation	2
(9) would not make appointments	1
(10) lack organization of self	1
(11) would not diet	1
	N = 38

For many clients, it was difficult to specifically say one factor changed the vocational outlook. In other instances it was evident that a specific change took place. Specific training stood out above others for several clients; however, the listings of other factors, except possibly numbers 7, 9 and 13, imply more completeness in being able to manage one's self in the environment. The majority of factors imply a new found maturity was reached by many clients.

In the second part of Table XXXIV, the factors high on the list suggest instances that revolve about family aspects that tend to make employment less possible. It is possible that some family patterns stifle growth in maturity. Many of the factors listed seem to indicate an undesirable maturity level.

Summary

Estimates were made of several characteristics pertaining to maturity. The trend of this information suggests the following:

(1) Aging seems to relate to more successful work assignments.

(2) Social adjustment estimates apparently distinguish between successful and unsuccessful work assignments.

(3) If one and two, above, are correct in being closely related to maturity, the information suggests organizational and curricula patterns be studied for greater emphasis within the framework of the total project.

(4) WISC Full Scale scores and achievement scores do not, apparently, relate closely to maturity level in work assignments.

(5) Specific factors, that seem to record changes in employability, suggest higher level maturity characteristics.

Part IV - Discussion and Implication of Results

The immediate result of Project 1681-RD was an awareness of the possibilities of a coordinated work program. The potential of this program reflected the experiences and approaches that had been developed by the school and rehabilitation. Both programs sought to increase the functioning of human potential, vocationally, and each brought skills, knowledge, and methodologies into play to meet this objective.

The rationale among three agencies (Portland School District, Department of Vocational Rehabilitation, and Goodwill Industries) most concerned with this project's operation and function was similar in most respects. The means, by which an ultimate goal was to be achieved, were diverse, but modified in practice and thought by the influence of all parties. The project learned to operate in a fashion that was common to all, yet, unique to other settings.

This section discusses several implications evolved from project services and those that might be suggested for continuing programs. It attempts to consider, briefly, many characteristics found to be inherent in this demonstration and what influences may be pertinent.

Inasmuch as this project was operating and working with diverse people and situations, not all concerns could appropriately lend themselves to mathematical terms. Part III attempted to use some statistical data where it was felt such methods might enable one to better estimate what information was available. This data, complying with the perceptions and observations of several people, tends to give a "consensus" of information about this project's findings.

Project 1681 was a kind of relationship that is obviously gaining wide acceptance nationwide. It is a fairly safe assumption that each cooperative program will take on some peculiar characteristics depending on the environment of the local agencies and their developments at a given time. What is appropriate in one locale may not be in another.

Personnel and Continuation

Project 1681 was a successful addition to the school program. It was felt that many students benefited in a way that would have been difficult to achieve before the project became a function of the total program. Additionally, it is felt that the sections (in-school, out-of-school, project) of the work program are complementary and can function together. While all roles are not defined, nor should they necessarily be, each section can be of crucial importance to the rehabilitative effort.

Information collected for this report, suggests a counselor (DVR) case load should be around thirty to forty clients. The specific number depends upon the amount of help the counselor will receive, or the type of training and experience he has obtained.

In terms of numbers of personnel, for continuation, a professional staff of five for the Portland School District Cooperative Program would be reasonable, considering the numbers, time, social problems, and amounts of activities affecting the rehabilitation effort. Depending upon available qualified personnel, this staff could take the form of three DVR counselors, a social worker, and a job development specialist, provided four school counselors are maintained by the school district. It would be possible to make adjustments in the above numbers dependent on the organization and/or qualifications of staff. One of the DVR counselors would be a supervising counselor, and may carry only a partial caseload depending upon the amount of administrative functions.

It is quite evident that an unusual amount of supervision is required as based upon the Project 1681 sample. Counseling and communications take much of the supervisory time; however, it is quite evident that work of a social nature needs more attention. Considering the general nature of referrals and the instances of social problems, it is felt, strongly, that more time must be devoted to those areas that can help the client better meet the demands placed upon him by society. Family relationships, "people" rapport, and a "style of life" are inherent in these demands, and they require time to work through acceptable patterns.

In the Portland area, this project has experienced some difficulty in obtaining appropriate job openings, including those that might be termed "workshop" level. The problem is not merely the amount of job openings, but to find situations that fit the skills and personalities of the clients. A job development specialist could help satisfy this problem in such a way that the responsibility of the counselor would be kept intact. This school-DVR program could support such a person, or possibly, in conjunction with similar programs depending upon numbers and organization. Project 1681 has operated, in part, with such personnel in DVR and several benefits have resulted through this kind of operation.

It is evident that professional personnel working in this kind of cooperative program will need to modify some of the concepts that might be found elsewhere. There appears to be a tendency of personnel, school and DVR, to attempt to work in such a manner that may be best described as "do it all yourself." This kind of trend, in many instances, can cause a duplication of services and confusion in organization. Personnel for a cooperative program must be the type who put needs of the individual client uppermost in rehabilitative plans. Many variables work upon the client, and it is necessary to use the skills of people versed in psychological and social proficiencies, and other pertinent disciplines if ultimate rehabilitation is to be found and maintained. Also, personnel working with the retarded will find an increasing necessity to "go to the scene of action" with most clients. The nature of retardation apparently includes problems in "time" and "space" orientation that makes organization, including scheduling appointments, transportation, etc., consistently necessary.

When the school curricula are specifically concerned with vocational learning, it is important that special education teachers be informed proficiently about the world of work; particularly those of unskilled, semi-skilled, or "service" nature. While it is possible to say things about a laundry, and review general applications to this kind of work, for instance, few professional people realize the demands, pressure, and "pace" that would be unfamiliar to most new workers; yet this is an employer expectation that is not generally known or demonstrated in many pre-vocational or "experience" work programs.

Within the overall DVR program, workshops, such as Goodwill Industries, are used for training purposes. There is substantial information to suggest that a DVR counselor be stationed within the workshop unit. This person could act as a supervisory-consultant individual through whom specific communications can be made to DVR counselors. Also, an advantage could be had in familiarization of "workday" operations, in-service concerns, and help in peculiar kinds of supervision, including specific remedial problems. Such a person would be invaluable in staffing individual clients and could make the work-supervisory function more appropriate to the training need.

For the continuing project, there are two areas of concern that might increase the overall functioning of the work program. One concern is in the organization of DVR involvement and the other is in the referral system.

It is suggested that a coordinating committee be formed as described in Question Eight of Part III of this report. From a rapport standpoint, this committee would have every possibility of keeping communications open at a level where operations could be instigated. It has been demonstrated that the joining of forces is administratively feasible and operationally practical. Such a program can be sustained without duplicating one agency's legal duties by the others. The coordinating committee can help to function in the selection of personnel, and assist in the resolution of problems which may arise in the operation of the program.

It is also suggested that the combined efforts of the whole rehabilitation team (teacher, school work coordinator, DVR counselor) be part of a referral staffing early in the school year. This would have the effect of enabling the continuing program to foresee many of the operational concerns and solidify "plans" before the fact. Also, stating the vocational concerns for each student could put into effect a better individual program through cooperative efforts. The time has passed when it is appropriate only to hand out referrals as the need arises. Many efforts can be instigated at a time where control and remedial functions could take effect before anyone has the right to expect competency.

Rehabilitation Process

The mode of operation used by DVR counselors is generally called the "rehabilitation plan." Those familiar with this "plan" know it as a series of steps from referral status to another status that could be described as an "outcome." The "outcome" could be a rehabilitated or a non-rehabilitated status depending upon the individual client and the variables that affected the situation. The above description, while sketchy, will be recognized by educators and counselors as a type of case-study technique.

Judging from recent communications, the rehabilitation plan has come under attack from several sources.[1] Upon close inspection, however, the concern does not appear to be so much against technique as it is about the degree of significance attached to parts of the "plan," and, perhaps, some definitions applied to the rehabilitation plan.

Contrary to what might be expected, case study methodology might be of significant value to the in-school and out-of-school work experience phase of the work program. Such a technique could go far in better estimating individual students before they get to the "project" stage. A newer "style" is implied from information gathered in this Project 1681 study (Note particularly Tables XIV and XXX).

The concern of "significance" attached to parts of the rehabilitation plan has some justification. This is particularly true if statewide DVR administration has a tendency, real or implied, to judge or concentrate upon movement of clients from one part of the "plan" to another. Reasonable expectations should be anticipated with any process of this nature, but neither special education, nor DVR, can say what the expectations might be. This study suggests many client problems centered around time, supervision, communication, and counseling, none of which indicates general rapid movement. Perhaps new guidelines, if necessary, may be in order if benefits must be documented. It is suggested that such documentation pay close attention to nature and data that has been collected from EMR cooperative programs and consideration be made to the particular setting.

Information suggests differences between results and documentation in the "rehabilitation process." Some "status" operations do not appear appropriate for this project's sample population. This concern has been evidenced by others (Deno, 1965, and others) and would appear to be firmly fixed in the minds of those responsible for it. Yet, it seems, each project finds the documentation of DVR wanting. Part of this problem may be due to unfamiliarization with the system; however, it must be recognized that one system cannot be all things to all situations, and, therefore, progress should be attempted to

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1. NARC National Convention, Portland, Oregon, 1967, American Association for Mental Deficiency, Denver, Colorado, 1967, and others. In the main, concern has been expressed over the DVR "numbers game" and "statuses" and "feasibility." This concern was also in evidence from several cooperating agencies.

alleviate some objections found in the reporting system. Concerned parties, including legislatures, should be further educated to these problems and what they indicate.

It is evident that workshop needs for applicable retarded are limited. Further, wages for workshop workers are so low that substantial rehabilitation is most difficult. This project could have placed double the amount it did if appropriate workshop placements could have been found. It is suggested that DVR take a leadership role in the workshop movement, particularly in urban areas.

Information suggests a follow-up investigation is needed for a relatively long period. The practice of contacting former graduates should be continued and intensified at least on a yearly basis, or more if necessary. Follow-up is indicated, also, for former clients regardless of closure status. Data collected for this report, suggested there is a need for the EMR of this project sample, and others, to have a person or place to relate to and communicate with at various times. It is suggested that commitments be made to graduates that help can be forthcoming from this project, for instance, and that their concerns may be answered so long as the need arises. This does not suggest a "life-care" program, but one in which the EMR can receive help and direction for many years past graduation regardless of status.

A relatively new dimension to the DVR program is the activities of the social worker. Activities within the total program can be immense in providing information and services related to client orientation to the school, peers, family, and community. Liaison work between groups, communications, rapport building, assistance, information gathering, and business functions add to the rehabilitation effort and seemingly makes it more lasting. Community relations, and work with community agencies, are particular areas in which the social worker can be of benefit to a program such as Project 1681. At no time, however, can the social worker relieve the counselor of his major responsibility but must serve as an adjunct to him.

Information collected for Project 1681 suggests early evaluation of district EMR students should be made and that programs be made to facilitate individual vocational functioning. Besides medical reports, early information about aptitudes, social concerns, and academic achievement should be rather basic for each individual.

Academic achievement has been the concern of the school for many years. Tests and measurements have afforded the teacher with some data with which to strengthen areas of concern. Many strategies and materials have helped the individual overcome deficits in academic needs and have helped in his vocational potential. Concern for academic achievement should be continued and strengthened as new information and research become known. Close attention to reporting of academic concerns can add to the evaluation and assessment of the individual's vocational potential and functioning.

Tests and measurements in motor areas are not as refined as those in academic areas, however, it is possible to obtain some reliable estimates of the aptitude function. As of 1968, the General Aptitude Test Battery is available to the Portland School District and appears appropriate for EMR students at the ninth grade level or above (the main interest being in the motor speed, coordination, perception, and dexterity areas). It is suggested that part of the general curricula of the school emphasize general improvement in the motor areas.

A social summary of each student seems applicable to the vocational potential of the EMR individual. Earlier evaluation of social concerns could make possible long term restoration processes as indicated by this sample.

Medical-Health Concerns

The implications of health concerns deserve special consideration. Data suggested over half of the project sample had some medical-health problem and in several instances, the project could alleviate the problem in part, or wholly, through various processes or means. It seems obvious that this sample of EMR students, for the most part, did not receive needed medical-health care throughout their lives.

This project had some successes with specific medicine control, under the direction of a physician, in cases of epilepsy, behavior control, some psychological disturbances, and internal disorders. Diet prescriptions, dental work, and help with eye, ear, nose, and throat problems made many clients function better vocationally. It would be a fairly safe assumption that classroom functioning could be increased if some medical-health problems were better controlled. It is interesting to note that the nearby Multiple Discipline Clinic of the University of Oregon Medical School, Portland, Oregon, has reported many successes in functioning after health restoration with similar, but younger, samples.

With the Project 1681 sample, there was evidence of medical-health changes from school certification to project certification (referral). Further, medical-health information did not, apparently, keep pace with the client's progress through school, and information suggested many variables "work" or change the client's medical-health status.

In all, information collected for this project suggests new means be sought to care for medical-health concerns. For individuals who have been in elementary special education programs, an additional physical examination could be made. Also, the preliminary examination (for initial certification) should broaden its scope of information. In some instances, earlier referral to the vocational project could help make medical restoration more possible and, hence, a more favorable vocational prognosis.

Information of a medical-health nature should be kept in more detail and be part of the individual's annual report. Also, initial medical examination should be kept and followed-up periodically. Such a program would need to involve the services of the school nurse and, perhaps, the social worker more particularly than in the past.

Special Education Programs

In discussing implication for the Special Education Program, it will be necessary to overlap some other areas. The intent, here is to more specifically bring attention to program concerns and to point out how interrelated the activities are for this project.

It is suggested that types of work evaluation be started at the ninth grade level. This may consist of the GATB and other appropriate measurements, and the school district's testing department could be instrumental in helping develop correct procedures. Beyond formal instrumentation, less sophisticated means may prove useful. Many workshop reports (Springfield Goodwill Industries, RD-873, 1967; Portland Goodwill Industries, RD-1736, 1967) give examples of work replications and tasks that might be adapted for classroom use. Further, many similar activities could be constructed, provided care is made in the purposes, aims, and objectives of the materials. In-school and out-of-school work experiences, under supervision, could serve as a laboratory to test out the evaluations, and corrective measures might be better controlled over the years spent in school special education programs. Workshops and other agencies could then be most useful in specific training areas and there would be less need for further evaluative information of the kind described here. It would seem that a large system, such as the Portland School District, could support such a program which may be best described as a continuous evaluation system.

At the same time evaluation takes place, attention must be paid to the maturity level of the individual. In some respects, it was felt this project accepted referrals that were too immature for work. Some of the previous discussions suggest relationships to maturity, but age and social constructs give evidence to their importance from several characteristics measured in this study. It would seem that work of a social nature and what might be best termed "work readiness" be part of the evaluative and program direction. It is doubtful that most EMR students would be ready for competitive employment much before school graduation.

Curriculum

An important feature of Project 1681 was the opportunity for curriculum work based in part upon information derived through intensive study of the EMR and this environment. While the curriculum is a most important part of special education, it cannot be considered the means to an "end project"; nor can the curriculum be considered a set of building blocks.

From a vocational standpoint, three curricula areas particularily evidenced themselves--academic, motor, and social; however, these should not be the only areas considered. Recreational and health activities, for instance, should be part of the learning situation for EMR youngsters as suggested from follow-up information.

"Training" gives evidence of correlating closely to employment potential. "Training," however, was a multi-factored part of this project. While specific training did tend to increase potential, there appeared to be many "sub-training" situations that improved functioning. When maturity and curricula are based upon solid foundations, training situations appear to be of most benefit and should be continued on a individual basis.

Curricula needs should be based upon a firm foundation of EMR needs and research. Information collected from this project suggests several specific areas of concern that might be included in the curriculum. Findings seem to reinforce many of the communications, interpersonal relationships, and social patterns commonly found in the literature. Employer concerns including "pace," production, schedules, "turnover," breakage, supervisory functions, etc. are not usual in many curricula yet these characteristics do give evidence to work stability.

It is evident that curriculum areas, including interpersonal relations, communication, vocational areas, physical and mental health, recreation, and physical surroundings need to be continually reinforced.

Community Support Aspects

As Project 1681 progressed through its initial years, the program staff became more and more involved with community agencies and other groups that were interested in retardation. Some of the accomplishments connected with various agencies are summarized below:

(1) Youth Opportunity Center - In this community the Youth Opportunity Center serves as an adjunct to the U.S. Employment Service serving the Portland Metropolitan area. Communication was established whereby special class pupils were administered aptitude tests (GATB) with the results made available to the Project. As time passed this became a standard procedure for Project clients. Contact was made with key personnel at the Employment office. The supervisor of counselors, the handicapped representative, individual counselors, GATB test administers, and placement counselors have all been contacted and the purposes and goals of the Project explained to them. Discussions concerning specific clients resulted in their acceptance of clients with employment resulting. A discussion of screening procedures for the Job Corps clients was also held. During the course of this project, several referrals came from Y.O.C. and it was found that we were able to mutually help one another. The Y.O.C. department also helped in some of the research concerns for this project, particularly in the use of the GATB measurement.

(2) Federal Civil Service - Of particular note was the work accomplished with the Federal Civil Service Commission. Mr. Walter Sakai, Civil Service Representative for this area, worked closely with the Project in initiating placement of mentally retarded young people in Federal employment. The results were encouraging. To date, some fifteen placements have been made to various agencies of the U.S. Civil Service Commission. The Forest Service, Veterans Administration, Interior Department, Soil Conservation, and Bonneville Power Administration were involved. These and other agencies are likely to provide additional openings.

(3) Manpower Development Training Act Office - This office had been contacted regarding types of programs available, and requirements necessary for enrollment of special class pupils were determined. The Project cooperated with the industrial laundries in part of their nationwide program under this office. Four industrial laundries in Portland have to date placed several of our clients.

(4) Neighborhood Youth Corps - The project staff assisted NYC personnel in placing mentally retarded pupils on out-of-school work opportunities. Discussions have been conducted outlining the responsibilities for supervising the mentally retarded high school pupils in work situations sponsored by NYC. Many of these work situations served as training and entry type situations for project clients.

(5) DVR Placement Counselor - Contact has been made here with individual counselors regarding the project to outline its purposes and goals. The project worked closely with the DVR Development specialist in aiding several project clients into employment situations.

(6) Donald E. Long Home - This home is the juvenile detention facility for the county. Contact was made with the director of the home regarding the project and its appropriateness in planning for mentally retarded adolescents at the home.

(7) Oregon State Public Welfare Commission - Discussions were carried on with case workers of pupils in families receiving public assistance for the purpose of carrying out appropriate planning for those pupils. Also the commission helped this project in interpretation of many of the new assistance rulings made yearly.

(8) Other - Project staff members made contact with the Portland Postmaster regarding implementation of the Federal program of hiring the mentally retarded under civil service without taking the competitive examination. This area of employment did prove fruitful for a limited number of clients.

Staff members explored the availability of nurses aide training, welding training, body and fender training, office training with personnel offices of local hospitals and Portland Community College. It was possible to find many placements with hospitals and the

Community College for specific kinds of training.

An orderly procedure was established with the Bureau of Labor for obtaining work permits for those mentally retarded pupils placed in work stations.

The project staff had participated in a group recently initiated in this community, that is the Interagency Committee on Services for the Mentally Retarded.

It became evident that the longer the project was in operation, more opportunities became available through the use of several agencies.

Part V - Summary and Recommendations

Project 1681 was initiated because of a concern for expanded development for services to the retarded. This selected demonstration project was organized to improve and systemize methods of work evaluation and follow-up, and to demonstrate the results of close cooperation between the Portland School District and the Department of Vocational Rehabilitation. The program sought to investigate several modes of operation and alleviate some of the problems found particularly with young EMR adults in vocational matters.

The project started in November 1964 and finished, on a grant basis, on June 30, 1968. It has served nearly 200 persons as certified clients, over 100 in an advisory capacity, and was in consultation and demonstration with another 200.

The primary purpose of the project was to demonstrate cooperative services, and to research, secondarily, the development of services and their effectiveness. The staff consisted of a project director, project supervisor, project coordinator, two DVR counselors, social worker, and a staff secretary. In addition, several departments of the school system were utilized.

A by-product of this project was the formulation of an agreement between the Portland Public Schools and the State Department of Vocational Rehabilitation for continuation of the cooperative relationships developed over the three year life of Project 1681. This agreement was initiated at the level of the workers who would be in closest daily contact, namely the school work experience coordinator and the DVR counselor. Examination of this agreement (Appendix D) will show that it is not encumbered with details but contains broad guidelines for the cooperative efforts in serving handicapped youth. This outcome is within the spirit of the remarks made by Dr. Daniel McAlees at a conference in Las Vegas in February 1968 sponsored by the Western Interstate Commission for Higher Education and having to do with "Cooperative Agreements Between Special Education and Rehabilitation Services in the West":

> "As both special education and vocational rehabilitation programs expand, it is logical and financially practical that both forces share facilities and resources in one continuous program of service. The disabled student needs all services that are available if he is to maintain a competitive position in today's fast moving world. Cooperative agreements are economically feasible as well as humanistic, and it has been demonstrated that the joining of forces is administratively feasible and operationally practical. Such a program can be sustained without infringing upon or duplicating of one agency's legal duties by the other. The resulting bond leads to stable, secure transition from the school environment to the living experience of the community.

> "The key word to all activities in their areas is cooperation. It matters little how detailed the contract is written--only the highest standards of professional cooperation will ensure success."

Before this project came into being, few special education graduates found their way to the Department of Vocational Rehabilitation. Because of Project 1681, better than half of the student senior population became clients and received benefits. This adjunct became considered, by teachers and counselors alike, a well articulated part of the continuum of services to disabled school-age youth.

Qualified personnel to work in vocational projects are still difficult to obtain. There has, however, been a noted increase of interest of persons to train in the rehabilitative retarded area. In-service and college training are encouraged.

In developing the coordinated program, it was difficult to define and delineate responsibility and roles of individuals. The school work program and the DVR plan were well established, and it became necessary to plan cooperatively "who" and "what" could provide most adequately for the individual. This required close communication ties and developmental planning.

At first, referrals tended to come from the school to the project near the end of the graduating year, but this method of referral proved unsatisfactory for a number of reasons. Later, referrals were planned at the beginning of the school year and this required greater communication among school and project staff, and became a more satisfactory arrangement. Future plans include early staffing for all junior and senior special education students. Experience suggests better developmental plans may be made in this way and individual objectives can be better met.

The role of the social worker slowly became defined. Part of the problem, here, was that historically counselors were used to handle "all" social contingencies themselves and did not know how to delegate responsibility in this area. There is a tendency for school and DVR personnel alike to try to do "everything themselves." However, the social worker brought skills new to this program that benefited individuals beyond what had previously been done.

Social summaries brought information that was more complete and evaluative than before. Arrangements, especially with community agencies, became more complete and lasting and follow-up services could be added. Closer rapport could be made with individuals in need and, importantly, with families. Recently, parent group conferences have been formed, and this activity promises to help close the communications gap found with many families. Details of a social nature were better met with the addition of a social worker to the rehabilitation team.

As the project progressed, it was found that follow-up information must be continually made. Individual patterns were found to change, many times quite rapidly. It is not necessarily appropriate to assume that any pattern is liable to be stable. Different kinds of motivation cause changes in vocational direction and, for that matter, the direction of an individual in society. The retarded appear to be influenced by many forces in the community. For example, there were several instances of a "friend" indicating to a client that he might obtain work elsewhere. The client would sometimes quit one job thinking he would be hired at another and, of course, this would not come about. Similar situations were found in several other kinds of social patterns. The need was demonstrated for retarded persons to have a source of information and direction, one in which they could have confidence long after graduation and "rehabilitation" in most instances.

Summary of conclusions drawn from Project 1681 relating to development of a coordinated program:

(1) A "coordinating committee" seems to be an appropriate means to facilitate and help administer a cooperative program.

(2) A school-DVR program is of great benefit and influence upon retarded clients.

(3) The "rehabilitation plan" seems to be an appropriate technique and should be continued, with modifications, to include the school and client EMR population.

(4) A caseload for counselors, working full-time on vocational functions for the EMR, should be from thirty to forty clients.

(5) Staffing among school and DVR personnel should continue on a regular basis. This is necessary for the purpose of making referrals, developing programs for individual development, and experiencing common concerns. This may include direct conferences with teachers.

(6) A social worker and job development specialist can add a meaningful dimension to the rehabilitation effort.

(7) Facilities for the School-DVR program should be together.

(8) Clients should be continued on a rehabilitation basis for a period of years after the case is closed and periodic follow-up should be made. Present DVR regulations would have to be changed in order to support this.

The number of students who received training and became better prepared for vocational functioning was increased because of Project 1681. Previous to the project most emphasis on job finding was placed on the individual. Information suggested graduating students had a difficult time finding work, and if they did it was usually six months to twelve months after graduation.

The project did not completely change the above pattern; however, the new employment picture did present more diversified kinds of work and individuals more prepared for the entry jobs. Further, there appeared to be a tendency for the employment to be lasting. It is felt, however, the employability rate could be higher.

The DVR counselors need to be able to spend more time in observing and supervising work training and job tryout situations. Because of the average caseload and the small amounts of personnel that could be used during the grant period, time and numbers did not allow this kind of supervision to take place in the degree it should. As of this writing, DVR is contemplating a placement of one of its personnel in one of the larger training stations. Also, the Department is organizing the job development areas to relieve some counselor pressures. These aspects may make personal supervision easier and it has been demonstrated that supervisory functions do help employability prospects.

For some project clients, the lack of workshops in the Portland area had a tendency to lessen employability prospects. Project 1681 placed clients in two such workshops. One was quite limited in its continuing contracts. The second, Goodwill Industries, did have greater possibilities and more placements were possible. However, this workshop has many kinds of handicapping conditions. Goodwill Industries must consider its "input" and "output" in relationship to the numbers of employees. Presently there is some activity in the Portland area to expand the workshop movement which may make it possible for more appropriate project clients to be so employed.

As Appendix C indicates, employability of clients led to diverse placements. This fact suggests that selective training and placement helps lead to a better vocational "fit" and, according to project information, more lasting work.

Summary of conclusions drawn from Project 1681 relating to the number of mentally retarded students prepared for remunerative employment:

(1) The cooperative school-DVR program does increase client employability.

(2) The cooperative school-DVR program tended to lead to greater client work permanency.

(3) There is an intense need for sheltered workshops available to the retarded in the Portland area.

(4) Employment areas for the Project sample are quite diverse and training helps to increase the vocational potential.

(5) Close supervision (counseling and guidance) helped to increase the employability of clients.

(6) Continuous development is needed in job areas appropriate to the clients' capabilities.

(7) The school-DVR counselor guidance helps to increase the job finding effort more appropriately than self efforts.

As Project 1681 progressed, it became evident that work evaluation must be a continuous process. The school and DVR working together make this possible.

Many clients were evaluated at Goodwill Industries followed by further direction as indicated by the evaluation. Many of the students were referred to work adjustment or vocational training. It was difficult to estimate at the evaluation level if a client could do better in one occupational field or another. The "job tryout" evaluations gave the best estimates, but for most clients the procedure seemed to require further involvement with Work Adjustment Training or On-the-Job Training.

Information collected for Project 1681 suggests that the problem was not so much one of evaluation but one of development of maturity for work and of potential for work. It would be reasonable to expect that after four years of being in a special education program geared to prevocational interests, and a work experience program utilizing the talents of several professional persons, a good estimate of work potential could be made. This was true in a majority of the cases.

It is suggested that the school-DVR program work out a plan of earlier diagnosis and evaluation. The continuing cooperative program would emphasize individual vocational development. It suggests preliminary work evaluation be made of all EMR special education students at the ninth grade level, or earlier. The school, with DVR acting in a consultative capacity, will need to develop means of assessment which could take various forms depending upon what objectives and aims are established. This could include the use of formal testings, such as the GATB, check lists, observations, and samplings, and a developmental program that could utilize such evaluative information.

Carefully organized planning and expansion of the work experience areas might provide additional work tryout areas such as proved successful in Project 1681. This plan would require school-DVR cooperative planning and close supervision in placement; however, this is possible under the existing conditions. The main responsibility during this phase would be assumed by the school work coordinators; however, it would call for close cooperative planning with DVR personnel. DVR responsibilities could lie in employment areas and certain training areas depending upon the individual case.

Even with the help of developmental evaluation and work tryout, as has been described, many students will reach the graduation level needing more help in direction and training. Therefore, the total program will still need to plan training stations for many students. As in Project 1681, community training areas should be developed on a continuing basis, as well as making full use of the resources of DVR.

The intent of the foregoing discussion has been to focus attention upon the possibilities of the resources which a school district, such as Portland's, and DVR have within their scope. The evaluation phase including continuous assessment and development must make appropriate use of the work experience areas including close supervision and the use of a social worker.

Summary of conclusion drawn from Project 1681 relating to work evaluation, work tryout, and work training:

(1) Evaluative vocational information needs to be kept on each individual and on a developmental basis.

(2) Specific work information, including what, where, and why of particular experiences helps guide and rehabilitation effort.

(3) Medical evaluations are pertinent to the rehabilitation effort and provide usable information for many clients. There is some evidence "medicals" may be especially appropriate at early high school levels and yet current medical information should be maintained.

(4) Work tryouts, work experience, evaluation, and work samples are effective means of diagnosis and developing rehabilitation.

(5) Students and/or clients need help in their development toward normal maturity and this may increase through vocational development programs.

It is evident from Project 1681 that diagnosis is an important parameter of rehabilitation work.

Descriptive information of work experience, medical evaluations, achievements records held prominent places in determining plan and program direction for individual clients. New, however, to this program was the increased necessity to gain evaluation-diagnostic data on sound work aptitude characteristics of the individual.

Social summaries, in particular, were beneficial in diagnosing a "style of life" that may be used in the rehabilitation effort. Family attidues were particularly important in Project 1681 relationships. Good "attitudes " were also factors in vocational rehabilitation and appeared to be developmental. This suggests the need for early work training including the help of a social worker. If any one characteristic led to better employment, a good social pattern was evident, but it must be recognized that this is an extremely complex area and is influenced by many variables.

Another area for attention in diagnosis was aptitude characteristics of individuals. While extremely variable, generally the clients were found to be functioning lower in speed, coordination, dexterity, and perceptual abilities. Special studies and particular on-the-job training experiences such as those at Goodwill Industries have suggested, however, that some individual deficits can be brought to a higher level of functioning, and thus increase the employabilities level. Experimentation and further study are clearly called for in this aspect of vocational rehabilitation.

Based upon information from Project 1681 and data from many sources the Project and the school cooperatively wrote a tentative curriculum guide. The plans, discussions, organization, and context were made through the cooperative efforts of school and project personnel. The total operation included many planning sessions, discussion groups, and organizational conferences before actual writing took place. The curriculum project, at one time or another, included all personnel of the school and Project 1681.

At present, the tentative curriculum guide is being field tested and will be in a final[1] form near September 1969. Highlights of this curriculum include: (1) a curriculum which uses experiences, school subjects, work and work evaluation to each academic, vocational, personal, and social skill; (2) a program which extends over a number of years so that needed guidance can be available for placement and adjustment in the community; (3) a program which provides for possible remediation of secondary handicapping conditions such as poor speech, visual problems, orthopedic handicaps, and hearing problems; (4) a concerted program of physical restoration including physical fitness training, cleanliness training, and grooming; (5) a curriculum which emphasizes the skills needed for independent living; (6) specific curricular provision to encourage self-confidence, cooperation, cheerfulness, ability to accept criticism, ability to mix socially, ability to mind one's own business, initiative, and respect for supervision; (7) a program that includes on-the-job training in high school buildings on the high school campus in special work training programs for students; and, finally, (8) a guide substantially developed by teachers and based upon experiences in the classroom.

It is felt that the curriculum guide will serve as a basis for many vocational and rehabilitation concerns in the special education program development.

Summary of conclusion drawn from Project 1681 relating to diagnosis, placement, and curriculum development:

(1) Diagnostic information helps in individual program rehabilitation efforts.

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[1] The word "final" refers to that stage of development when the guide will be published by the Curriculum Department of the Portland Public Schools.

(2) Job placements are aided, and have more holding power, when under the influence of the counselor and based upon supervisory and evaluation information.

(3) There is evidence to suggest that particular efforts be made in developing "attitude" and "aptitude" areas in the special education program.

(4) Curriculum concerns for a developmental program should be based upon student experiences.

The coordination and cooperation of vocational programs for individual clients became a normal part of the project operation between the special teachers and the project counselors. After evaluations, for instance, several clients were returned to the classroom where a specific program of learning and an additional work experience could be carried out. This required agreements and communication between the professional staffs to use their knowledge in individual program development. This function became an accepted part of the program. As the professional staff came to understand the function and concerns of others, the operation of the total program became more successful and client progress was increased.

Future plans call for in-service classes conducted for professional staff in "work programs for the retarded." Involvement in meetings, training courses, and conferences will continue.

Summary of conclusion drawn from Project 1681 relating to instruction and methods of professional staff:

(1) Work programs call for the highest degree of cooperative planning among the professional staffs in programs for the retarded.

(2) The key to communication appears to be one of involvement in many activities specifically relating to the progress and plans of the individuals.

(3) Work programs must be planned and operated for individual clients and on an individual basis.

(4) It is important that teachers and counselors alike become involved in rehabilitation plans.

(5) Employability and problems of work must be constantly reviewed and kept current with each individual.

APPENDIX A

PORTLAND PUBLIC SCHOOLS
Department of Special Education
Vocational Rehabilitation Project
220 N. E. Beech Street
Portland, Oregon 97212

Special Class Teacher and Work Experience Coordinator Referral to Vocational Rehabilitation Project

Pupil's Name:______________________________ Date:_________________
Address:___________________________________ Telephone:____________
School:______________________Class:________Soc. Sec. No.:________

Parents or Guardian:____

1. Academic performance:

2. Attendance: 3. Health:
4. Special Interests: (1) (2)

5. Attitude of Home toward school:
toward work experience:

6. Strengths and/or weaknesses:

7. In-school work experience (if none, please explain)

(9th grade)__________	Successful Unsuccessful	(10th grade)______	Successful Unsuccessful
(11th grade)_________	Successful Unsuccessful	(12th grade)______	Successful Unsuccessful

8. List out-of-school work experience:

9. Need for Voc. Rehab. services (Brief summary - use reverse side of paper)
10. Signature of Teacher_____________________Date___________________

. . . .

Out-of-School Work Coordinator

Evaluation of Out-of-school work experiences
11th grade:

12th grade:

Need for Voc. Rehab. Services: Now______________Later-when?_______
Comments or additional information (Use reverse side of paper)

Work experience coordinator's signature________________Date________

. . . .

Received by Project Coordinator______________________Date________
Assigned to:____

APPENDIX B

Rating Scale

On the following page is a list of students with whom you are familiar. You are asked to rate these students according to your judgment about their vocational potential with respect to the general population of your neighborhood high school.

The scale asks your opinion about each student with regard to occupational prognosis. Give each name a rating of A, B, or C according to your estimate on an "as best you know it" basis.

Ratings are:

A - A good or high prognosis toward the vocational. The transition from school to employment should be relatively smooth barring unforeseen events. The student should be able to obtain employment similar to the regular school population.

B - A fair prognosis toward the vocational. The transition from school to employment should be tenuous depending on subtle characteristics and events. The student may, or may not, be able to obtain employment similar to the regular school population.

C - A poor or difficult prognosis toward the vocational. The transition from school to employment should be relatively difficult. The student should be able to obtain employment dissimilar to the regular school population.

The information is to be used for descriptive purposes in the Final Report of the Vocational Project.

Call Dr. Plue, 288-5361, Ext. 44, if you wish any explanation of the above.

When you have completed the list, please mail in the envelope provided.

APPENDIX C

List of Client Job Placement in Project 1681

(1) Dishwasher	(3)
(2) Contract Shop - assembly and packaging (Workshop)	(8)
(3) Dental Laboratory - delivery and packaging	(2)
(4) Electronic parts assembler	
(5) Hardware packaging	(2)
(6) Hospital Maintenance	(2)
(7) A cook assistant	
(8) Clothing manufacture seamtress	(3)
(9) Forest service - tree planter and warehouse	(2)
(10) Car detailer	(2)
(11) Merchant marine - oiler	
(12) Electronic products - warehousemen	
(13) Laundry - towel folder	
(14) Custodian	(3)
(15) Sewing - workshop	(2)
(16) Waitress	(4)
(17) Steel Company - loader	
(18) Hospital - linen presser	
(19) Hospital complex - warehouse and loader	
(20) Floorboy (workshop)	(4)
(21) Warehouseman	(2)
(22) File clerk	(2)
(23) Furniture manufacturing	(4)
(24) Barrel maker	

continued

(25) Dental laboratory - technician assistant (3)

(26) Cartographic assistant (2)

(27) Switchboard operator

(28) Health spa - locker boy

(29) Service station attendent

(30) Public park maintenance

(31) Mail sorter

(32) Housekeeper

(33) Beauty operator assistant

APPENDIX D

THE PORTLAND PROGRAM PLAN
A
COOPERATIVE PROGRAM
BETWEEN
PORTLAND SCHOOL DISTRICT
AND
DEPARTMENT OF VOCATIONAL REHABILITATION
STATE OF OREGON

THE PORTLAND PROGRAM PLAN

A
COOPERATIVE PROGRAM
Between
PORTLAND SCHOOL DISTRICT
and
DEPARTMENT OF VOCATIONAL REHABILITATION
STATE OF OREGON

The School-Work Program

I. General Purpose:

The cooperative program between the Portland School District and the Department of Vocational Rehabilitation is designed to aid the mentally handicapped person. This program centers on vocational planning and is oriented toward eventual gainful employment for students less able to compete on the labor market.

As both special education and vocational rehabilitation programs expand, it is logical and financially practical that both forces share facilities and resources in one continuous program of service. It is recognized that many handicapped youngsters may need further services beyond regular requirements.

It has been demonstrated, at least in experimental projects, that the joining of forces is administratively feasible and operationally practical. Such a program can be sustained without infringing upon or duplication of one agency's legal duties by the other. The resulting bond leads to stable, secure transition from the school environment to living experience of the community.

The key word in this program, and included in the title, is cooperation. It matters little in what detail the contract is written--only the highest standards of professional cooperation will ensure success.

II. Definitions of Service:

1. "Portland School District" refers to the participating schools which have special education classes operating at the secondary level.

2. "Department of Vocational Rehabilitation" refers to the Portland Office of the Department of Vocational Rehabilitation, State of Oregon.

3. "The Portland Program" refers to the rehabilitation program developing school-home-community experiences for eligible youths

classified as handicapped and certified as clients by the cooperative agreement.

4. "Program Coordinator" refers to the Regional Director of the Department of Vocational Rehabilitation whose responsibility is the coordination of the rehabilitative aspects of the program with the public schools.

5. "Eligibility" refers to a combination of requirements for services as determined by the Department of Vocational Rehabilitation:

   a. the presence of a physical or mental disability with the resulting functional limitation of activities.

   b. the existence of a substantial employment handicap caused by the limitation resulting from such a disability.

   c. a reasonable expectation that the program should improve the employability of the student.

6. "Client" refers to the mentally handicapped student receiving joint educational and occupational services. Clients are selected on the basis of individual needs as determined by a joint agreement involving both school and DVR personnel.

7. "Special Class Teacher" refers to the certified specialist in classroom techniques instructing the mentally retarded in academic and vocational training.

8. "Work Coordinator" refers to the school-appointed teacher assigned to work coordinately with the DVR counselor. This work experience coordinator plays a double role in this program. He is a Special Education teacher first--a specialist with the curriculum; and, second, a functioning member of the rehabilitation service. He gives continuous contact and supervision of the in-school and out-of-school placement. The DVR counselor provides supportive assistance and guidance.

9. "Vocational Rehabilitation Counselor" refers to the authorized agent of DVR who is assigned to the school district, working jointly with the school staff responsible for rehabilitation services to all eligible student-clients in special education by participating in evaluations, counseling in job-readiness, training, placement, supervision, and follow-up.

10. "Social Worker" (Field representative, family worker). It must be recognized that there may be influences both in and outside the school setting that could affect the client's attitude and performance. The field representative is responsible for developing lines of communication which will facilitate understanding of the services available, gain rapport with the client

and his family, and place emphasis on those factors which will aid the rehabilitation process. A Vocational Rehabilitation Counselor or other qualified personnel who has special knowledge of family evaluation and counseling may qualify for the position.

11. "Job Development Specialist" - This person is responsible for developing placement opportunities for employment of clients within the community and in coordination with other members of the staff. He will work closely with employers, union representatives, and other resource people to develop out-of-school placements. This does not relieve the Vocational Rehabilitation Counselor of his responsibility for placement.

III. Department of Vocational Rehabilitation Services:

1. Counseling and Guidance

Members of the staff are trained in counseling techniques and are experienced in dealing with many of the social, economic, vocational, educational, and medical problems which can occur with handicapped students.

2. Job Analysis

Counselors are trained in this technique, and this should become an integral part of the planning for individual client programs. An analysis of employment situations and work tasks, which may include individual client tasks, could be of value to the program in preparing curricula or vocational plans.

3. Psychological and Vocational Testing

Many members of the staff are trained to give and interpret various types of individual and group tests. Many of these tests are available to the counselor and can be administered by him as needed. (The use of testing by the counselor is not intended to bypass a school counselor or school psychologist but to supplement where not provided by the school and it is expected that pertinent information will be shared.)

4. Job and Work Experience Training Program

Members of the staff are generally familiar with the employment climate in their community and are experienced in contacting potential trainers and employers. This, in conjunction with their ability to analyze the job and the employer, relative to the suitability of the placement, should help to lessen the work coordinator's load in securing work-experience placements, if needed.

5. Training and Job Supervision

The work coordinators and counselors, together, make an ideal supervisory team. They are familiar with employers and their problems and can be of real value in helping to train the employer in working with retardates. They also can help the student solve actual work problems.

6. Diagnostic and Evaluative Services

The staff can provide to the student all of the diagnostic and evaluative services which the Department provides to other disabled individuals. This can include free general medical examinations, specialty medical examinations, speech and hearing examinations, and personal and work adjustment programs in private or public facilities (Goodwill workshops, Rehabilitation Institute of Oregon, etc.).

7. Purchasing Specialized Services

Based on the financial need of the student and his family, the counselor can provide such services as corrective surgeries, glasses, hearing aids, therapy, special clothing or tools needed for a particular job, and maintenance and/or transportation as needed in conjunction with all services.

8. Placement and Follow-up Services

Whenever necessary, the staff can provide regular job placement and follow-up services to the student after he leaves the school setting. This assures a continuous program for the student after he leaves school.

IV. Facilities and Resources:

All resources of the Department of Vocational Rehabilitation and the Portland School District will be utilized to the fullest extent. In addition, private and public agencies will be used as appropriate. Community resources will be developed to provide for maximum vocational activities.

V. Records, Reports, and Reviews:

The Portland School District and the Department of Vocational Rehabilitation will jointly maintain appropriate accounts and records for audit purposes, and make reports on progress as may be reasonably required.

VI. Operation:

The Portland School District and the Department of Vocational Rehabilitation will set up a unit for the administration of the operational program. This unit will:

1. Assign specialists who will perform the functions of this cooperative program. Hiring and termination will be jointly approved by the Department of Vocational Rehabilitation and the Portland School District.

2. Determine the nature and scope of services to be provided under the plan.

3. Approve expenditures in accordance with established DVR policies.

4. Be responsible for all individual vocational rehabilitation plans.

5. Accept referral of those students of the Portland School District who need and are eligible for vocational rehabilitation services.

6. Perform other duties and functions, such as administrative, technical, and consultative, as may be necessary to program operation and control.

VII. Budget:

The Portland School District will, prior to the normal school year, prepare an estimate of expenditures for vocational rehabilitation purposes. This estimate will be filed in writing with the Controller of the Department of Vocational Rehabilitation for use in estimating Federal Fund requirements for operation of the program. In addition, the Portland School District will provide monthly reports of actual expenditures to the Controller of the Department of Vocational Rehabilitation to support claims for Federal matching funds under the Vocational Rehabilitation Act.

VIII. Administrative Control and Organization:

The Department of Vocational Rehabilitation and the Portland School District are under the general supervision of their respective administrations. The Department of Vocational Rehabilitation is the designated agency responsible for the administration and operation of the State Plan for Vocational Rehabilitation services. In this cooperative agreement between the Department of Vocational Rehabilitation and the Portland School District, the administrative control of most rehabilitative services and personnel rests with the Department of Vocational Rehabilitation. A Coordinating Committee will be established to function in the selction of personnel, and assist in the resolution of problems which may arise in the operation of the program. The committee will consist of the Director of Special Education, the Supervisor of the Mentally Retarded Program, the Senior Work Experience Coordinator, the DVR Regional Director, the Assistant Regional Director-M.R. Programs, and the Senior Counselor.

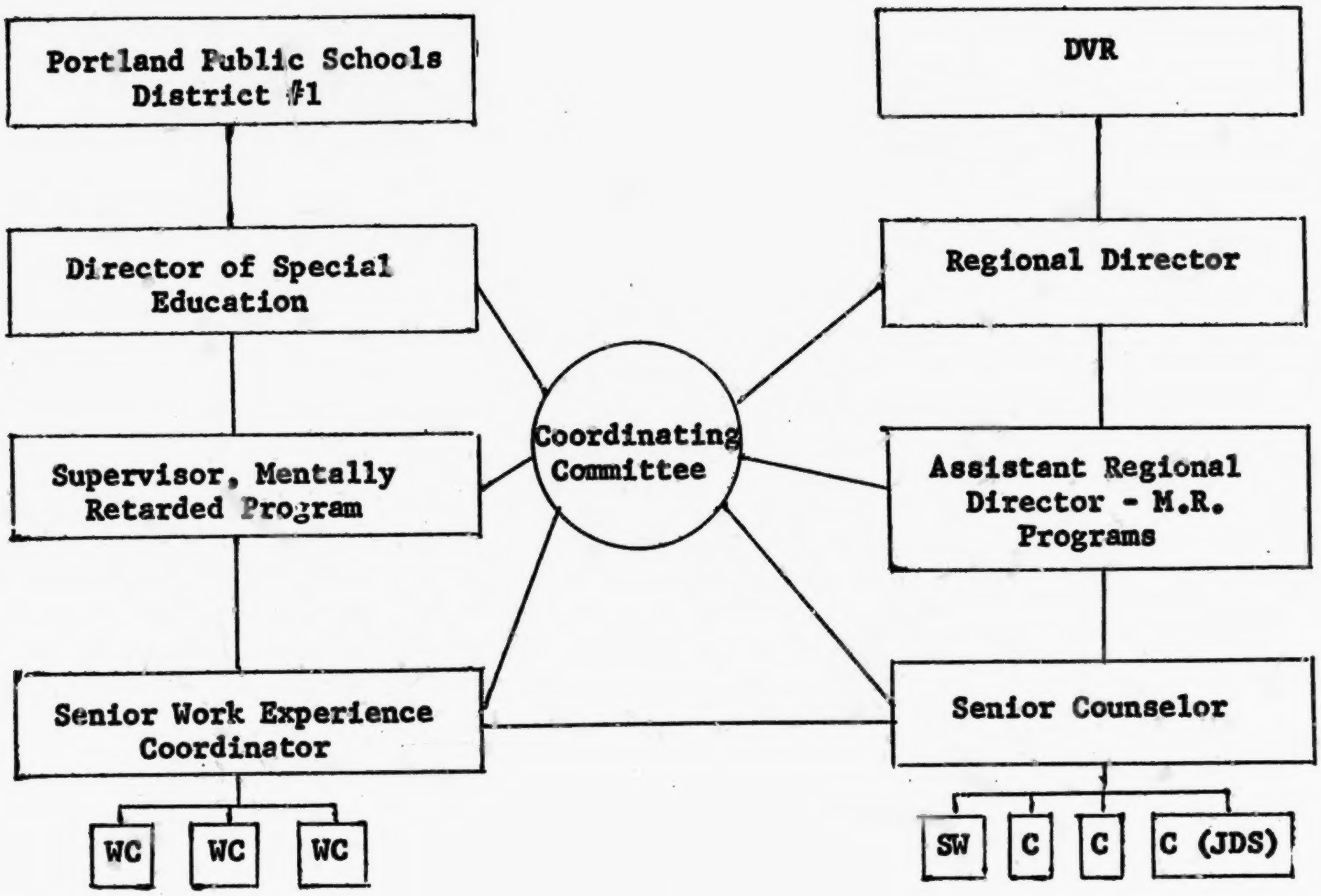
IX. Agreement Terms:

This agreement may be terminated by either party upon 90 days' written notice. It may be revised or amended by mutual consent in conformity with the regulations of the Department of Vocational Rehabilitation and the Portland School District.

______________________________ Date:____________________
State Director
Department of Vocational Rehabilitation
State of Oregon

______________________________ Date:____________________
Superintendent
Portland School District No. 1

______________________________ Date:____________________
Director
Department of Special Education
Portland School District No. 1


Portland Public Schools District #1
Director of Special Education
Supervisor, Mentally Retarded Program
Senior Work Experience Coordinator
WC
WC
WC
Coordinating Committee
DVR
Regional Director
Assistant Regional Director - M.R. Programs
Senior Counselor
SW
C
C
C (JDS)

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*Although these several dissertaions make a greater or lesser contribution to the topic of this Project Report, they all bear one similarity: they all report aspects of the Portland program for mentally retarded youth, thereby indicating substantial attention to the population and the program of Portland's High School EMR effort.

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